



US009205248B2

(12) **United States Patent**
Wu et al.

(10) **Patent No.:** **US 9,205,248 B2**
(45) **Date of Patent:** **Dec. 8, 2015**

(54) **SAFETY DRUG DELIVERY CONNECTORS**

(56) **References Cited**

(75) Inventors: **Yongxian Wu**, Wayne, NJ (US); **Yun Jin**, Morristown, NJ (US); **Mitali Aon**, Princeton Junction, NJ (US); **Michael D. Garrison**, Sparta, NJ (US)

(73) Assignee: **Becton, Dickinson and Company**, Franklin Lakes, NJ (US)

(*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 0 days.

U.S. PATENT DOCUMENTS

3,557,778 A * 1/1971 Hughes A61B 5/1438
600/577
3,570,484 A 3/1971 Steer
4,038,983 A * 8/1977 Mittleman F16K 15/147
417/435
4,103,686 A * 8/1978 LeFevre A61M 5/172
137/211
4,143,853 A 3/1979 Abramson

(Continued)

FOREIGN PATENT DOCUMENTS

CN 2484967 4/2002
CN 2724746 9/2005

(Continued)

(21) Appl. No.: **12/711,641**

(22) Filed: **Feb. 24, 2010**

(65) **Prior Publication Data**

US 2011/0208128 A1 Aug. 25, 2011

(51) **Int. Cl.**

A61M 5/00 (2006.01)
E03B 1/00 (2006.01)
A61M 39/24 (2006.01)
A61J 1/20 (2006.01)
A61M 39/26 (2006.01)

(52) **U.S. Cl.**

CPC **A61M 39/24** (2013.01); **A61J 1/201**
(2015.05); **A61J 1/2037** (2015.05); **A61J**
1/2051 (2015.05); **A61J 1/2096** (2013.01);
A61M 39/26 (2013.01); **A61J 2001/201**
(2013.01); **A61J 2001/2037** (2013.01); **A61J**
2001/2051 (2013.01); **A61M 2039/248**
(2013.01); **A61M 2039/261** (2013.01)

(58) **Field of Classification Search**

CPC **A61J 1/2096**; **A61J 2001/2037**; **A61M**
2039/248; **A61M 39/24**; **A61M 39/26**
USPC 604/30, 31, 33, 246, 247, 249, 256,
604/533, 534, 535, 537, 538, 539, 905;
251/149.6

See application file for complete search history.

OTHER PUBLICATIONS

Correspondence, *British Journal of Anaesthesia* 86(6) 2001, 896-904.

(Continued)

Primary Examiner — Nicholas Lucchesi

Assistant Examiner — Gerald Landry, II

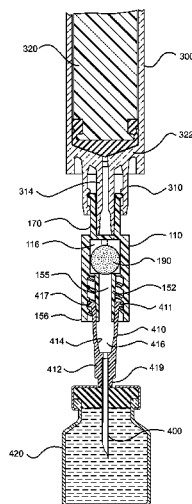
(74) *Attorney, Agent, or Firm* — Servilla Whitney LLC

(57)

ABSTRACT

Drug delivery connectors are provided for permitting and blocking fluid flow between a container and a catheter connector or other drug delivery site. Embodiments of the drug delivery connectors include a ball valve for forming a releasable seal within the drug delivery connectors. In one or more embodiments, the ball valve prevents fluid flow between an open proximal end and an open distal end of the drug delivery connector and is movable in a proximal direction to release the releasable seal to permit fluid flow from the open proximal direction to the open distal direction. Methods of delivering medication to a catheter connector that includes an actuator are also provided.

13 Claims, 23 Drawing Sheets



(56)

References Cited

U.S. PATENT DOCUMENTS

4,336,036	A	6/1982	Leeke et al.	
4,387,879	A	6/1983	Tauschinski	
4,485,014	A	11/1984	Gilroy et al.	
4,621,654	A *	11/1986	Holter	A61M 27/006 137/38
4,683,916	A	8/1987	Raines	
4,740,205	A	4/1988	Seltzer et al.	
4,838,875	A	6/1989	Somor	
5,069,225	A	12/1991	Okamura	
5,100,394	A	3/1992	Dudar et al.	
5,190,067	A	3/1993	Paradis et al.	
5,349,984	A	9/1994	Weinheimer et al.	
5,376,073	A	12/1994	Graves et al.	
5,390,898	A	2/1995	Smedley et al.	
5,437,648	A	8/1995	Graves et al.	
5,437,650	A	8/1995	Larkin et al.	
5,465,938	A	11/1995	Werge et al.	
5,484,421	A	1/1996	Smocer	
5,496,274	A	3/1996	Graves et al.	
5,509,911	A	4/1996	Cottone, Sr. et al.	
5,520,665	A	5/1996	Fleetwood	
5,535,785	A	7/1996	Werge et al.	
5,573,516	A	11/1996	Tyner	
5,584,314	A	12/1996	Bron	
5,616,133	A	4/1997	Cardenas	
5,616,136	A	4/1997	Shillington et al.	
5,749,861	A	5/1998	Guala et al.	
5,755,709	A	5/1998	Cuppy	
5,775,671	A	7/1998	Cote, Sr.	
5,817,063	A	10/1998	Turnbull	
5,827,429	A	10/1998	Ruschke et al.	
5,968,020	A	10/1999	Saito	
6,050,957	A *	4/2000	Desch	600/579
6,050,978	A	4/2000	Orr et al.	
6,096,024	A	8/2000	Graves et al.	
6,261,266	B1	7/2001	Jepson et al.	
6,273,870	B1	8/2001	Garvin	
6,402,207	B1	6/2002	Segal et al.	
6,428,514	B1	8/2002	Goebel et al.	
6,500,153	B1	12/2002	Sheppard et al.	
6,544,235	B2	4/2003	Motisi et al.	
6,579,263	B1 *	6/2003	Chernack	A61M 5/007 604/131
6,605,076	B1	8/2003	Jepson et al.	
6,612,624	B1	9/2003	Segal et al.	
6,988,510	B2	1/2006	Enerson	
7,040,598	B2	5/2006	Raybuck	
7,137,654	B2	11/2006	Segal et al.	
7,291,133	B1 *	11/2007	Kindler	A61M 5/36 604/247
7,306,566	B2	12/2007	Raybuck	
7,651,481	B2	1/2010	Raybuck	
2003/0018301	A1	1/2003	Sheppard et al.	
2003/0032940	A1	2/2003	Doyle	
2004/0201216	A1	10/2004	Segal et al.	
2004/0254542	A1 *	12/2004	Sacco	A61M 5/14 604/247
2005/0087715	A1 *	4/2005	Doyle	A61M 39/045 251/149.1
2006/0027270	A1	2/2006	Truitt et al.	
2006/0033331	A1	2/2006	Ziman	
2006/0237065	A1	10/2006	Enerson	
2007/0016161	A1	1/2007	Costa et al.	

2007/0179454	A1	8/2007	Ziman et al.
2007/0260195	A1	11/2007	Bartholomew et al.
2008/0045929	A1	2/2008	Birnback
2008/0058702	A1	3/2008	Arndt et al.
2008/0103486	A1	5/2008	Owens
2008/0139950	A1	6/2008	Molnar et al.
2008/0140020	A1	6/2008	Shirley
2008/0140055	A1	6/2008	Shirley
2008/0312640	A1	12/2008	Grant
2008/0318456	A1	12/2008	Yow et al.
2008/0319422	A1 *	12/2008	Cardenas
2009/0099552	A1	4/2009	Levy et al.
2009/0187166	A1	7/2009	Young
2010/0286558	A1	11/2010	Schraga
2011/0208160	A1	8/2011	Wu et al.

FOREIGN PATENT DOCUMENTS

EP	1233809	B1	9/2004
GB	2270725		3/1994
JP	2003-126269		5/2003
JP	2003-339876		12/2003
WO	WO 03/018105		3/2003
WO	WO-2006/020635	A2	2/2006
WO	WO-2007/089531	A2	8/2007

OTHER PUBLICATIONS

Anderson, MD, Ronald A. "Letter to the Editor: Infallible Measures Needed to Prevent Errors in the Administration of Chemotherapeutic Agents", *Medical and Pediatric Oncology* 32 1999, 401-402.

Katz, Leon "Inadvertent Misconnection of Medical Tubing: Protective Incompatibility", *Health and Welfare Canada*, Ottawa 1986, 2517-2518.

Lanigan, "Correspondence", *Anesthesia*, 56 2001, 585-610.

Toft, Prof., Brian "External Inquiry into the adverse incident that occurred at Queen's Medical Centre, Nottingham", *Department of Health* Jan. 4, 2001, 70 pgs.

Woods, Prof., Kent W. "The Prevention of Intrathecal Medication Errors—A report to the Chief Medical Officer", *Department of Health* Apr. 2001, 20 pgs.

Stabile, Mike, et al. "Medication Administration in Anesthesia", http://www.apsf.org/resource_center/newsletter/2007/fall/02_medicaladministration.htm, Dec. 10, 2009, 6 pgs.

Sheppard, Ian, et al., "Medication Safety Alerts", *JCPH*, vol. 57, Jun. 2004, 176-179.

Non-Final Office Action in U.S. Appl. No. 12/711,805, mailed Apr. 11, 2011, 15 pgs.

Final Office Action in U.S. Appl. No. 12/711,805, mailed Oct. 12, 2011, 15 pgs.

PCT International Search Report & Written Opinion in PCT/US2011/045281, mailed Apr. 19, 2012, 23 pgs.

Non-Final Office Action in U.S. Appl. No. 12/844,546, dated Jun. 25, 2012, 24 pgs.

Non-Final Office Action in U.S. Appl. No. 12/711,805, dated Dec. 20, 2013, 17 pages.

PCT International Search Report in PCT/US2011/025858, dated May 27, 2011, 2 pgs.

PCT IPRP & Written Opinion in PCT/US2011/025858, dated Aug. 28, 2012, 8 pgs.

Final Office Action in U.S. Appl. No. 12/711,805, dated Sep. 25, 2014, 16 pages.

* cited by examiner

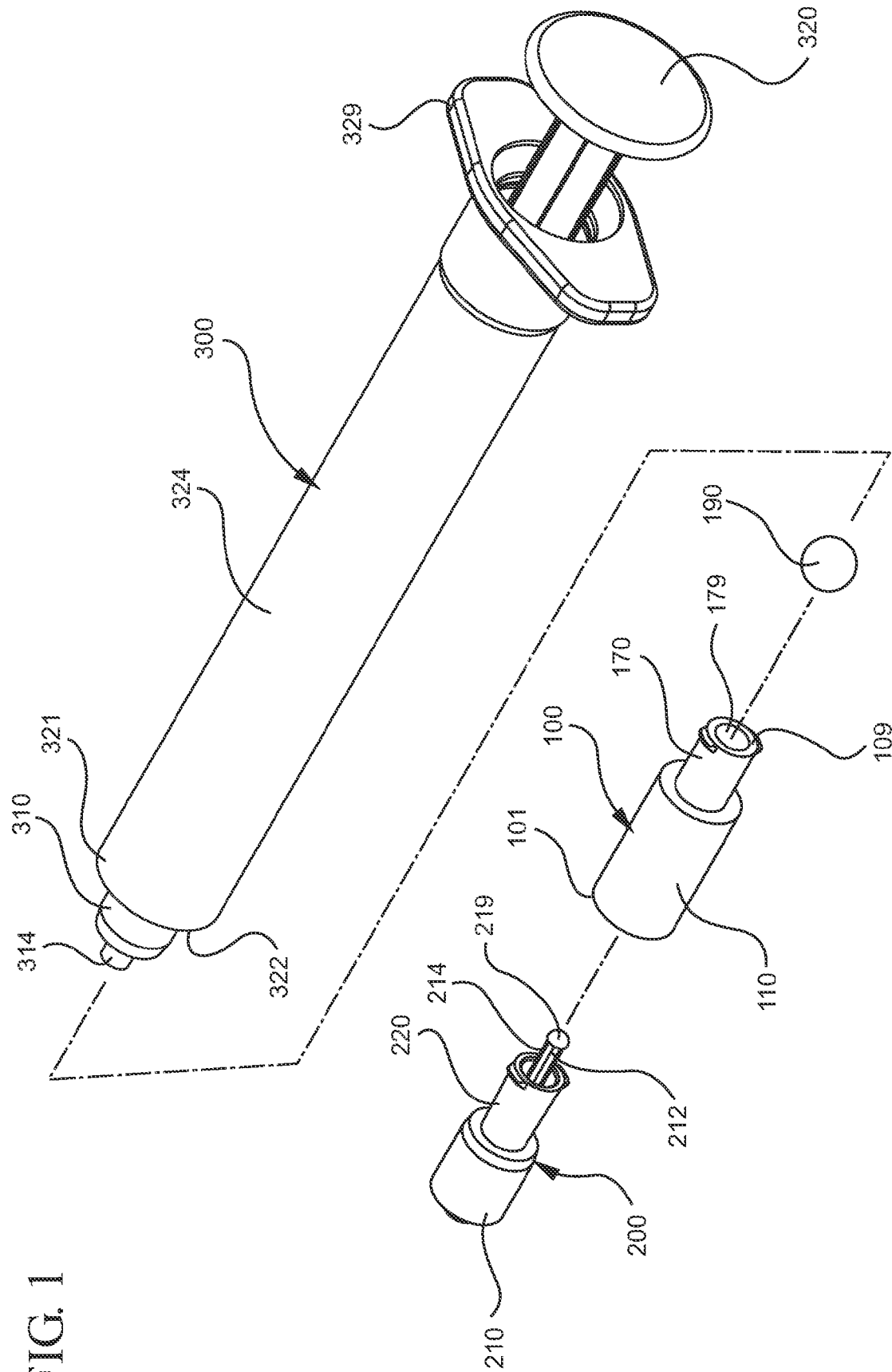
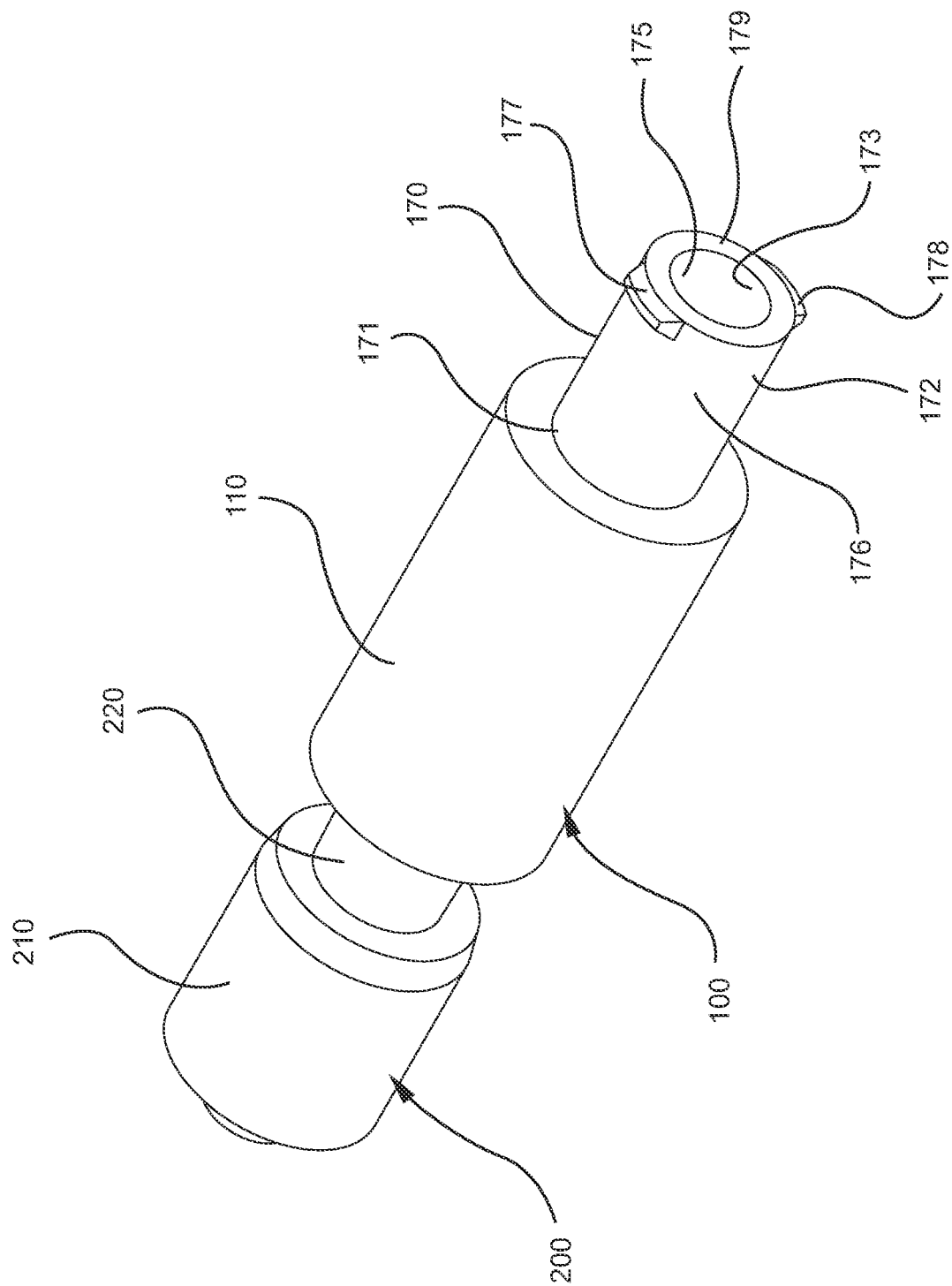
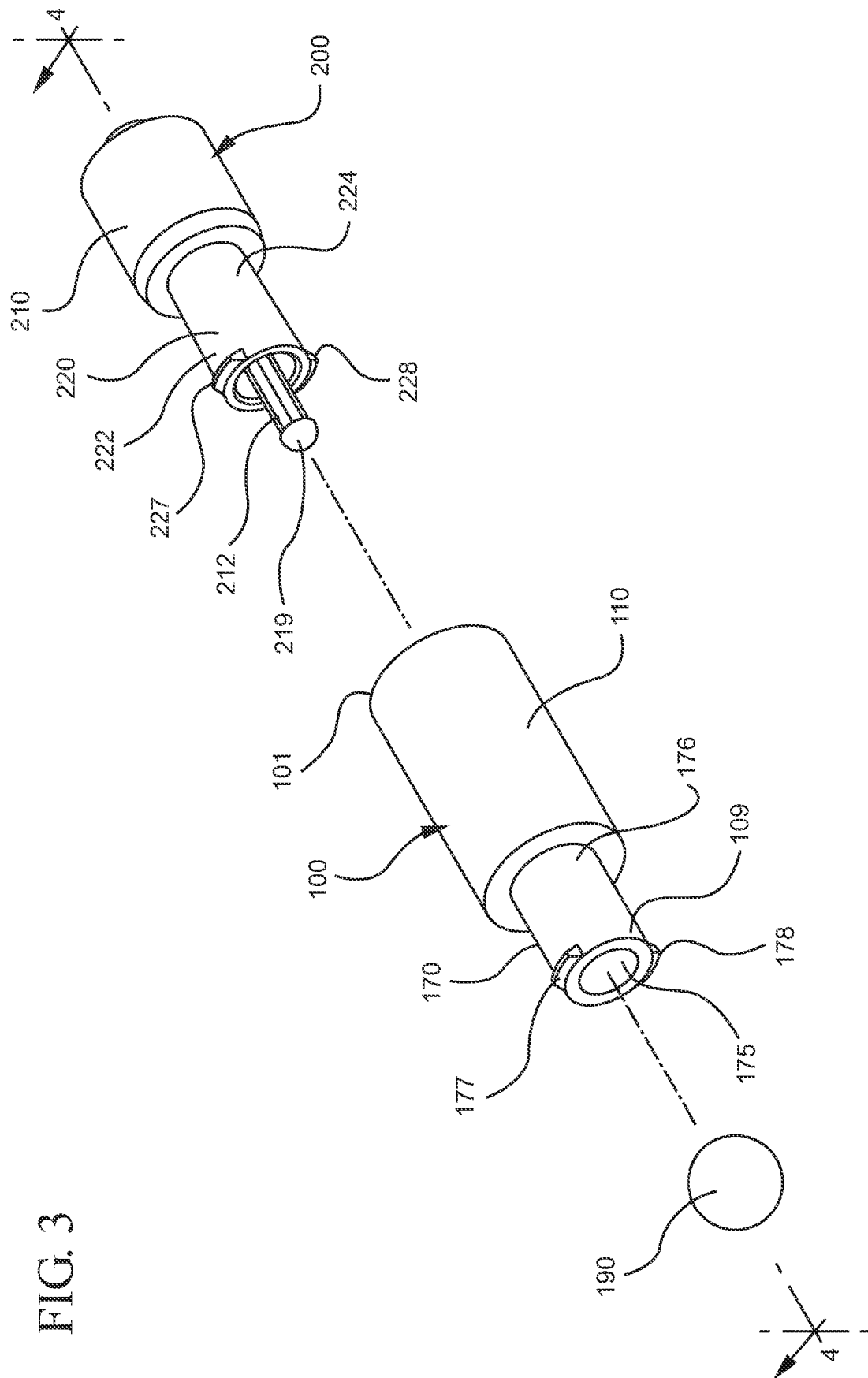
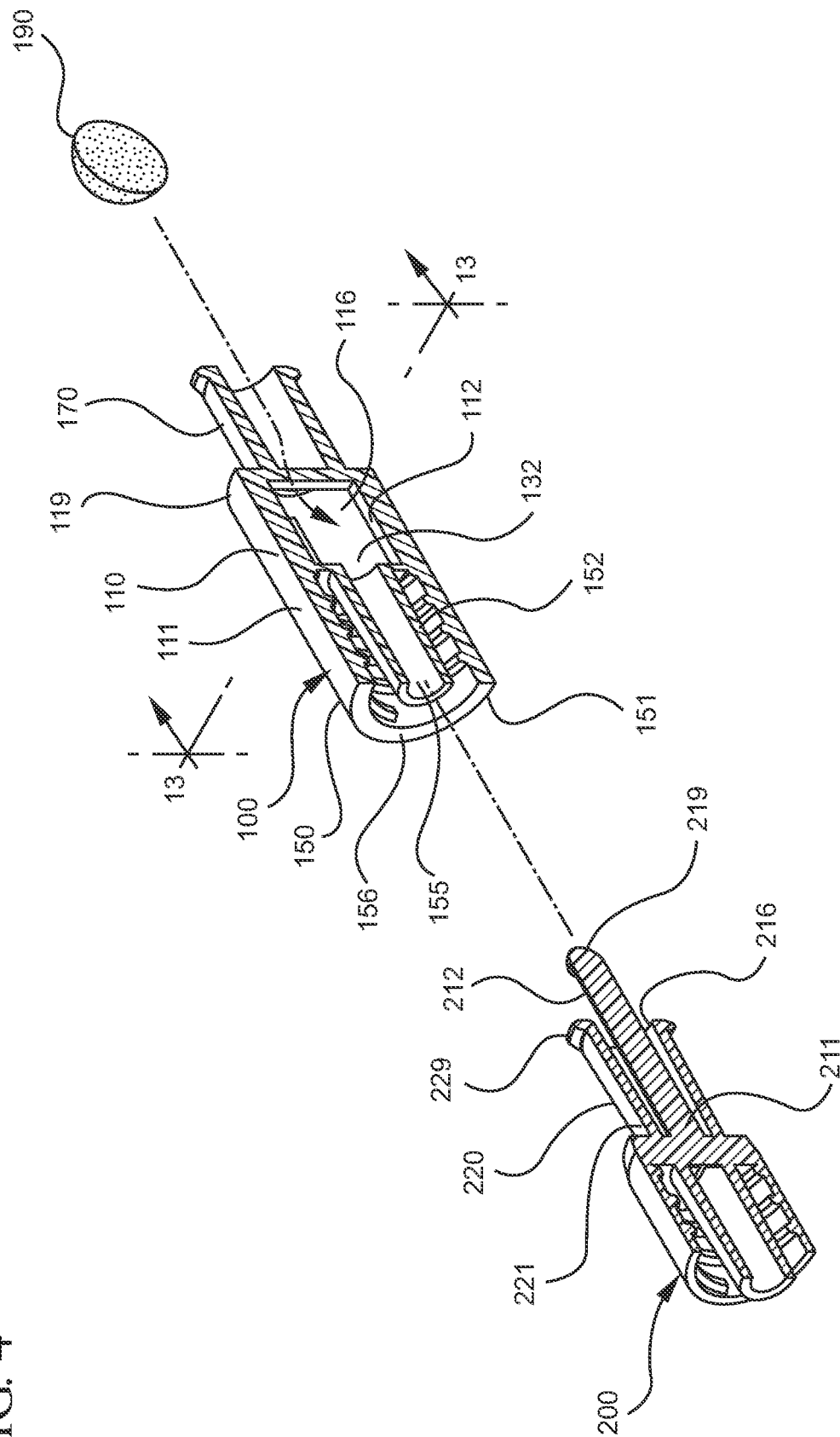


FIG. 2



3
G
I
L

FILE



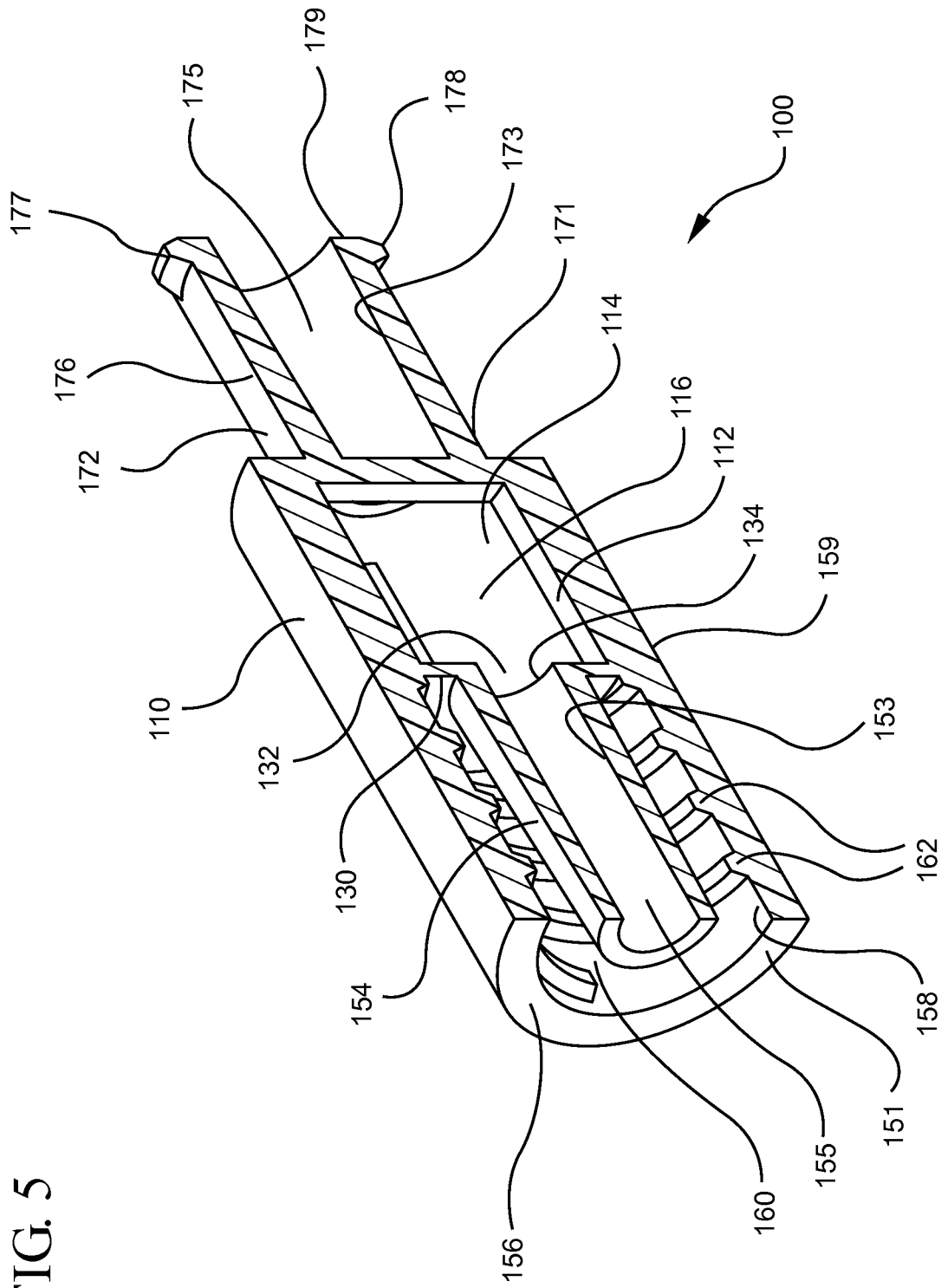
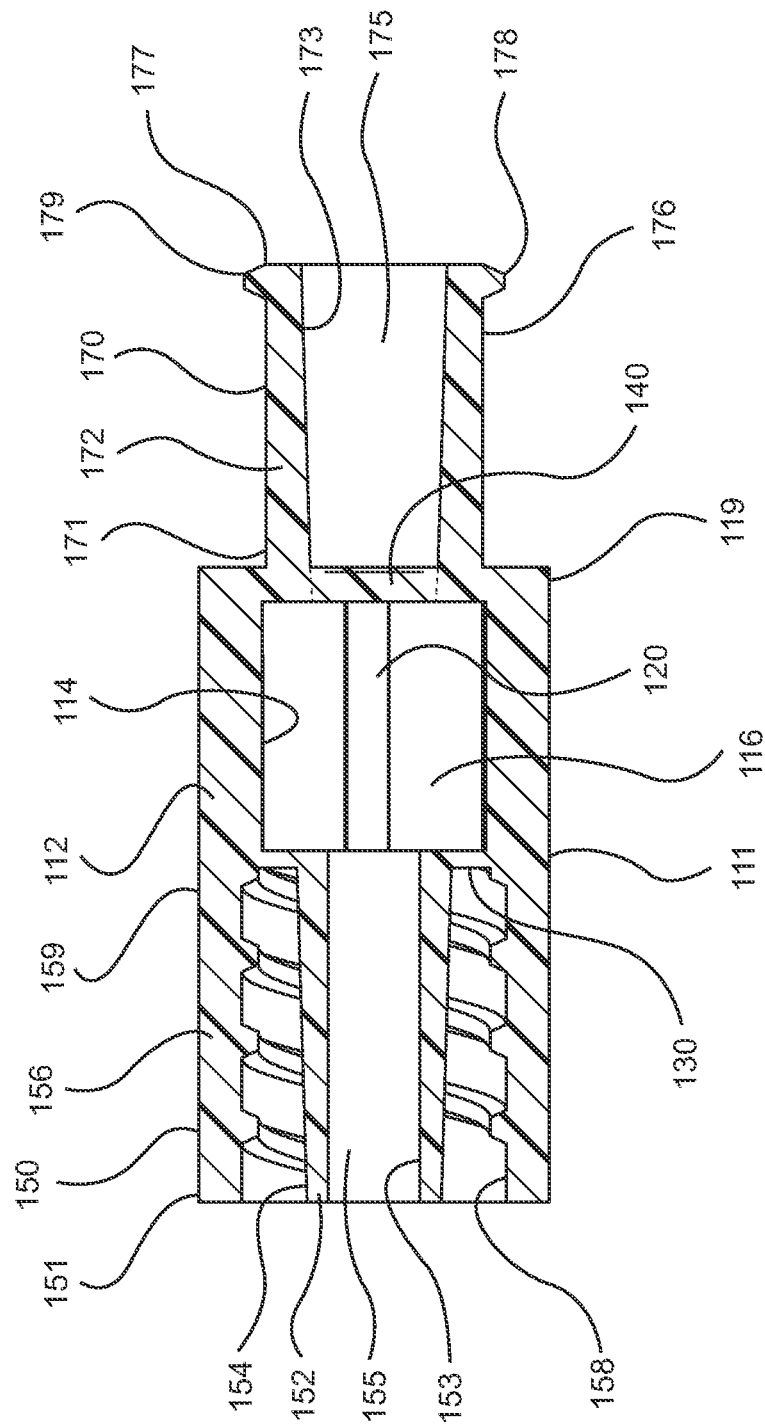
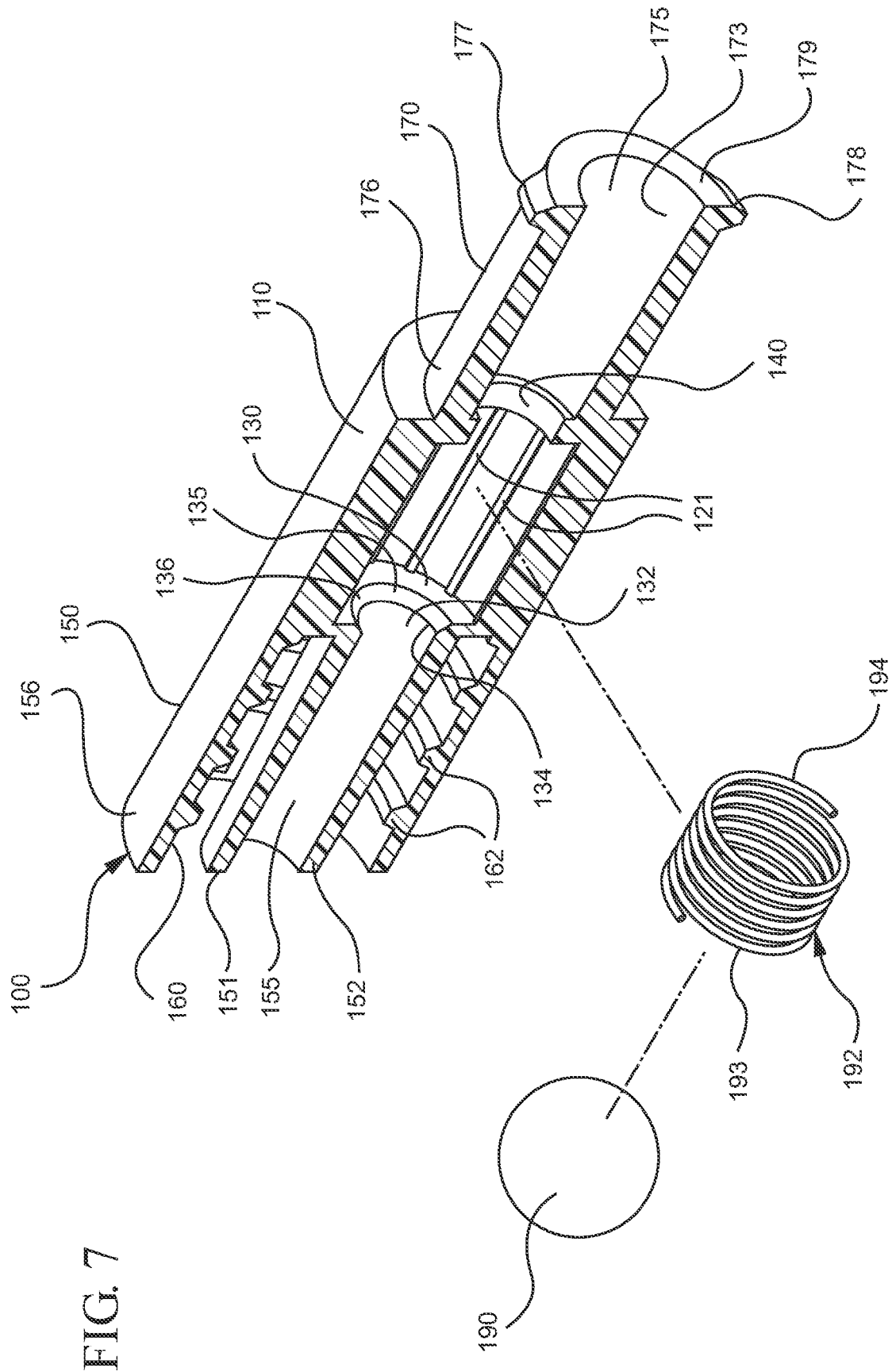
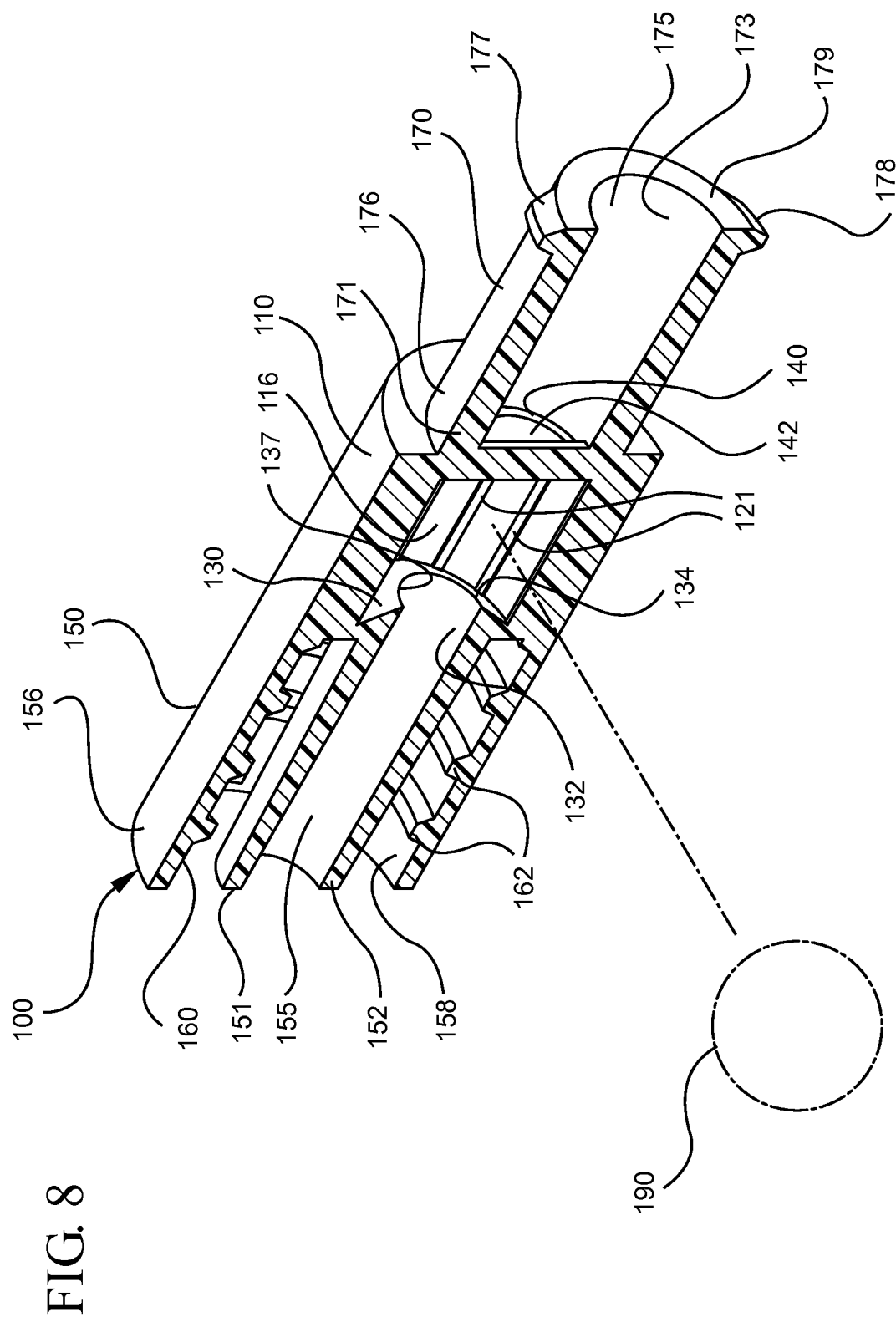
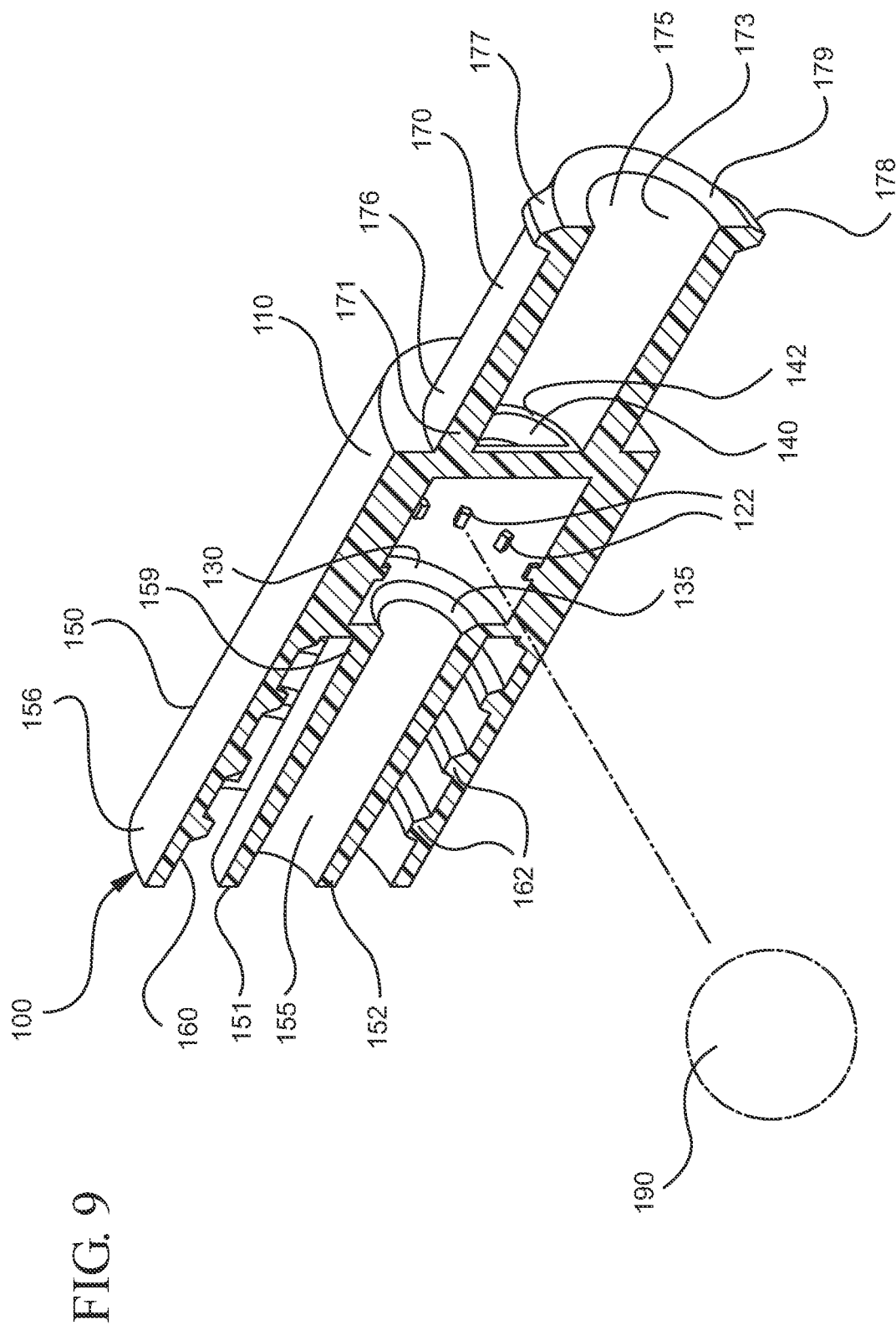


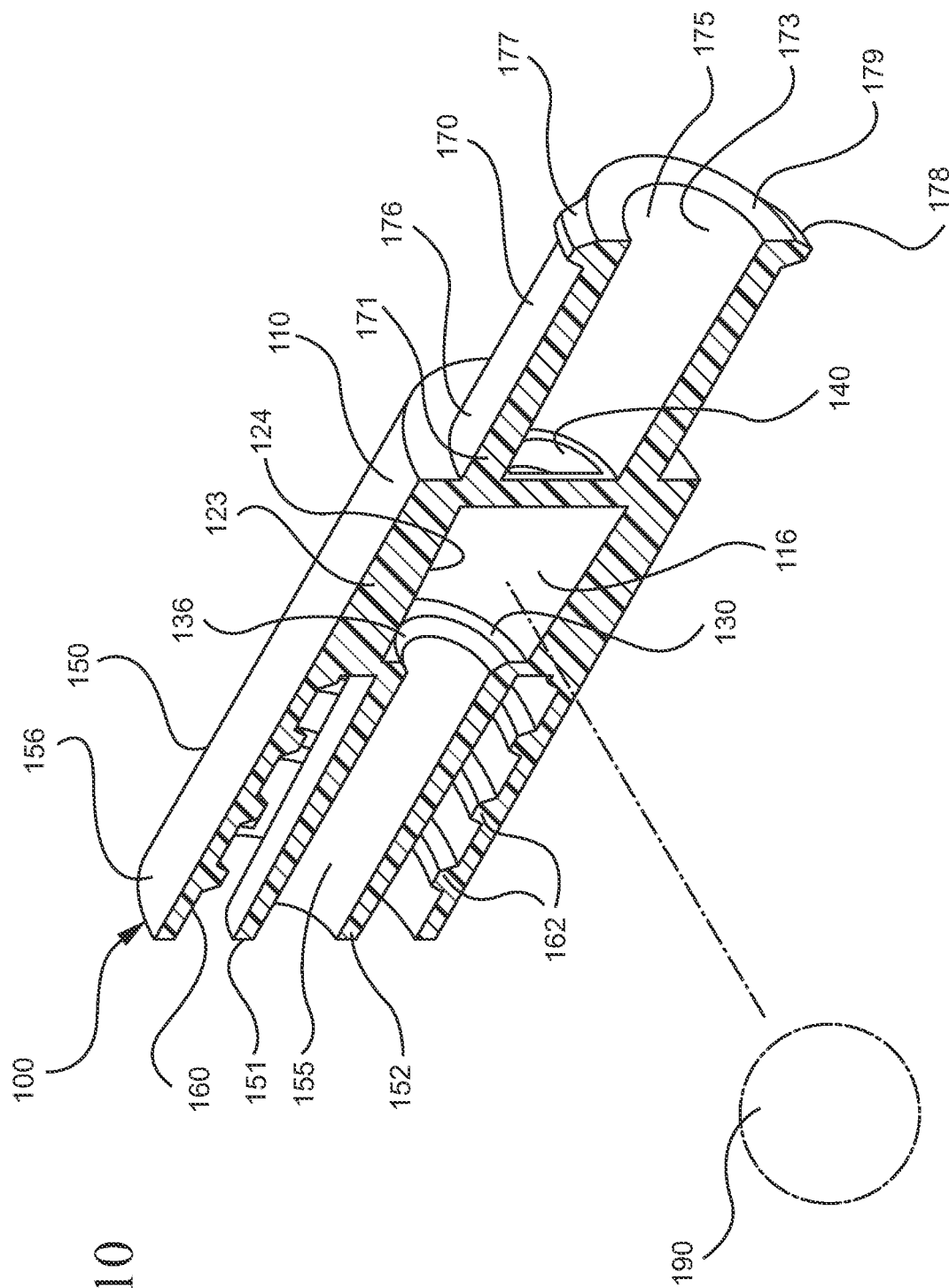
FIG. 6

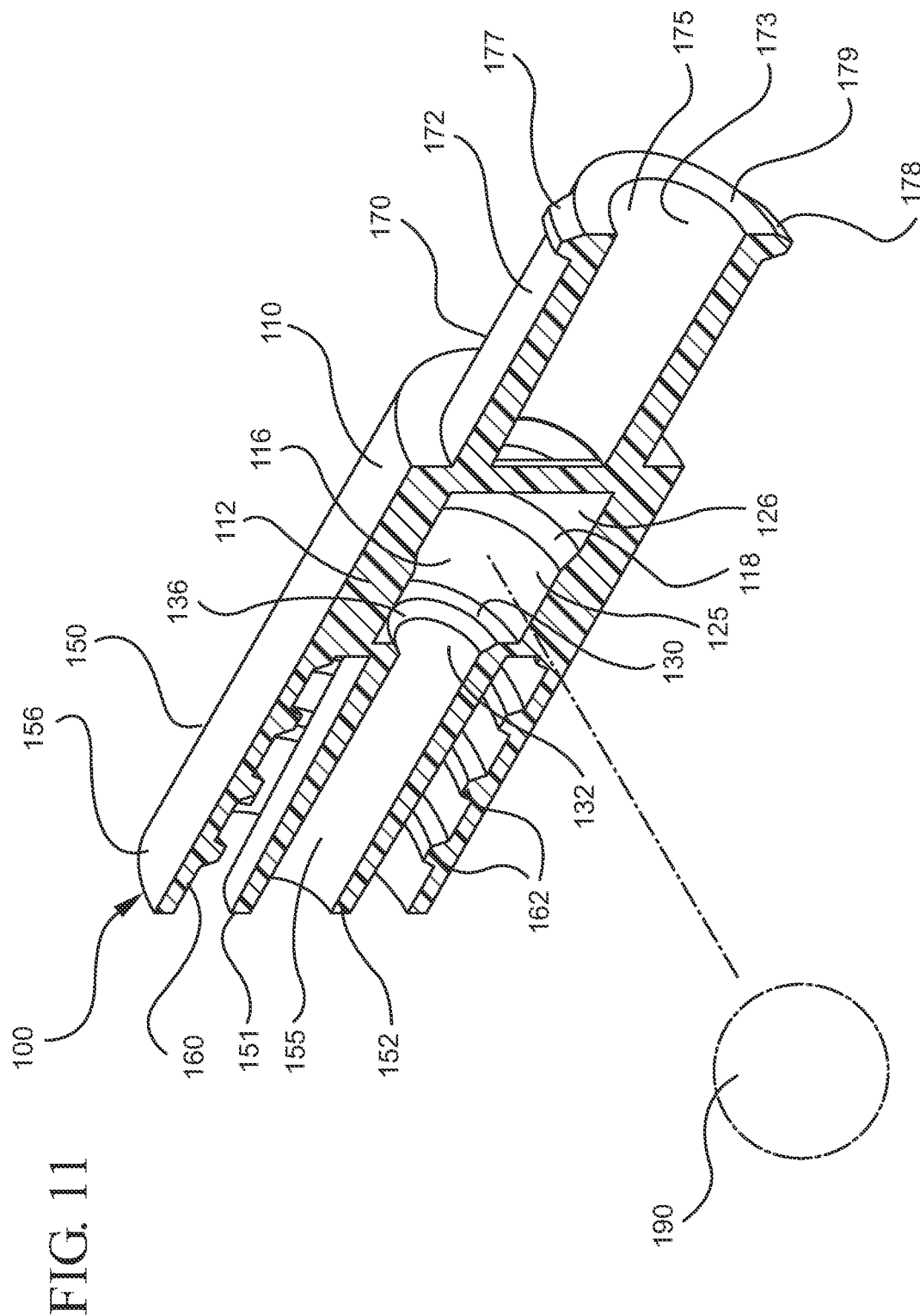












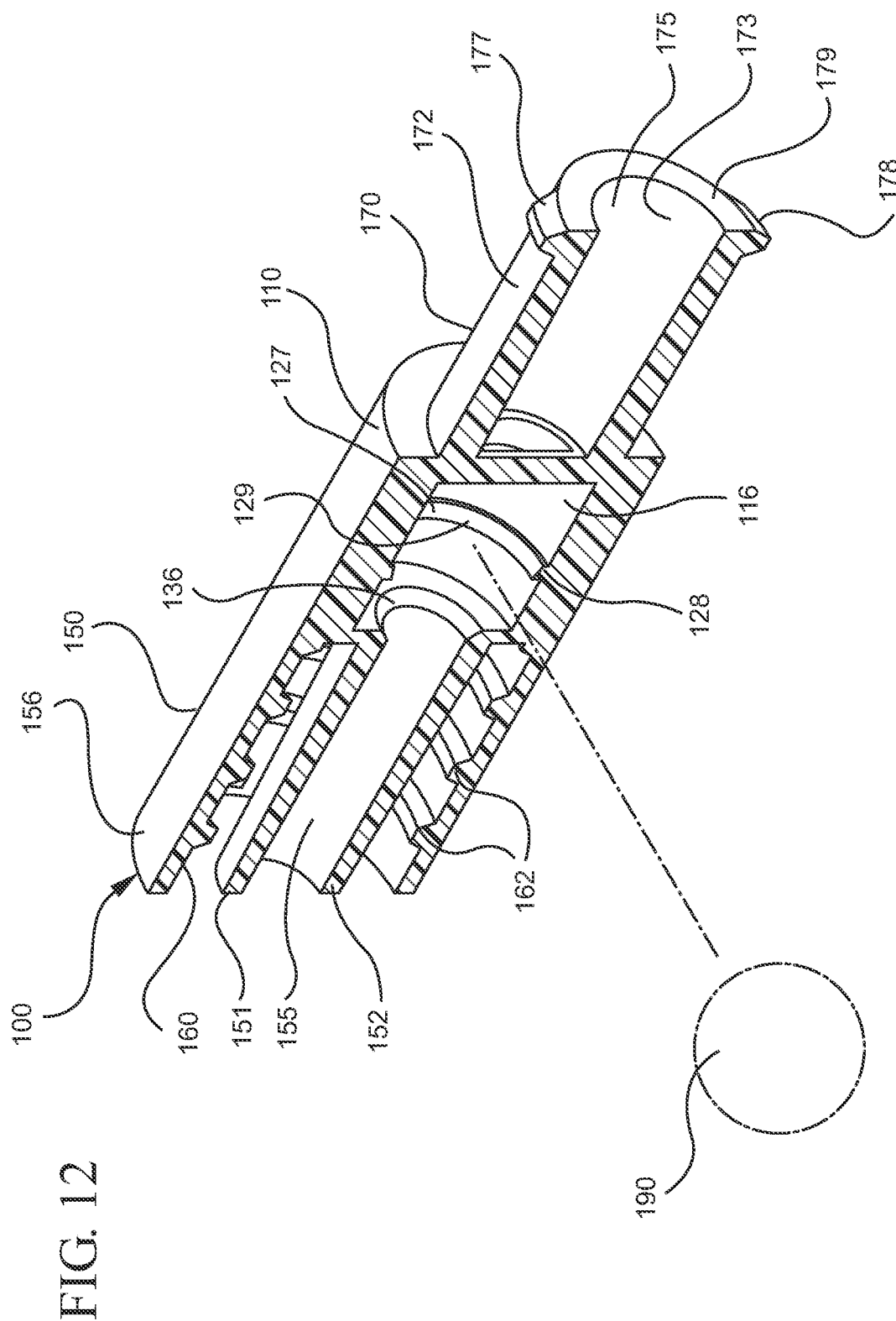


FIG. 14

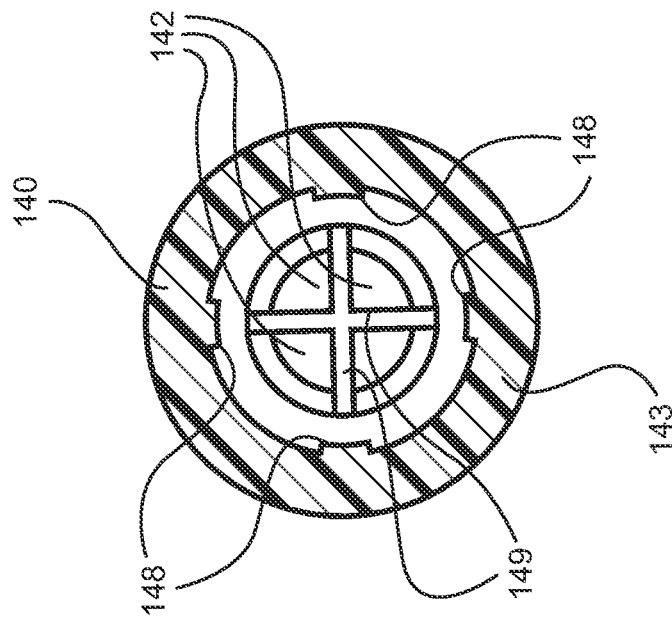


FIG. 14A

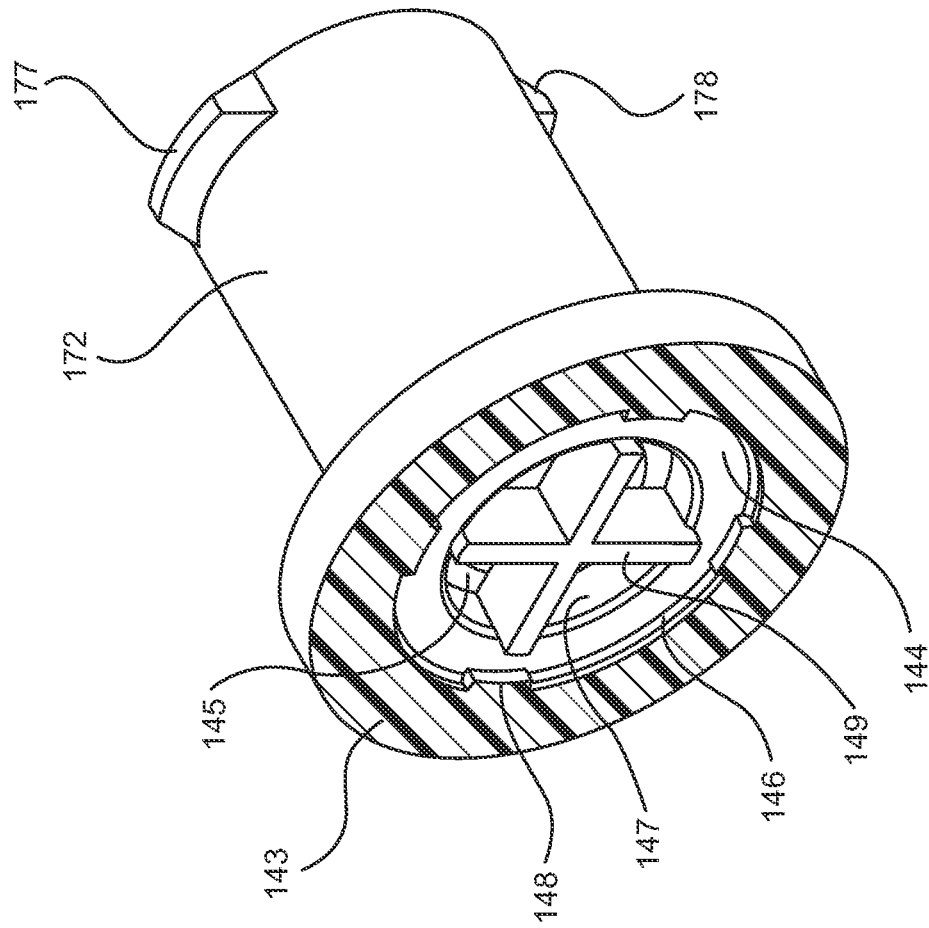


FIG. 15

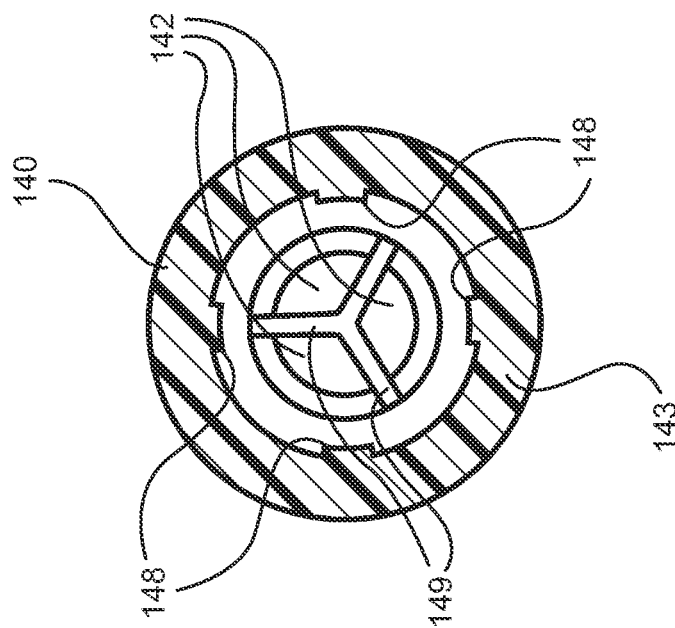
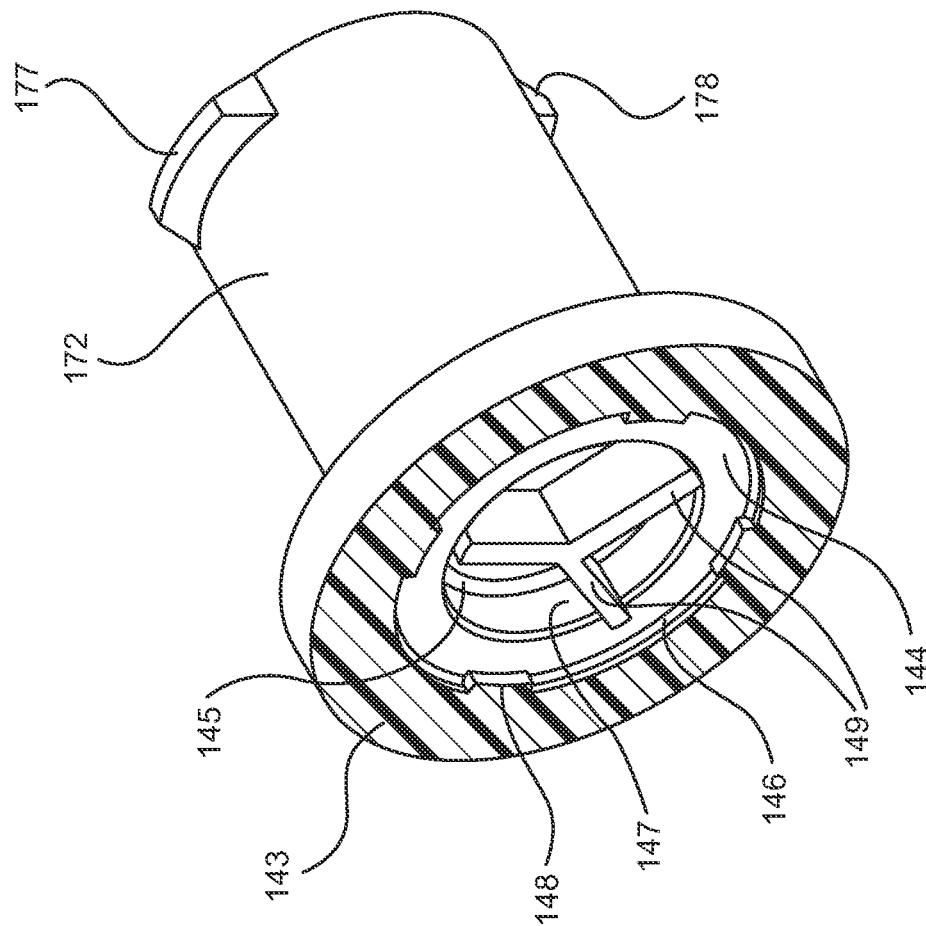


FIG. 15A



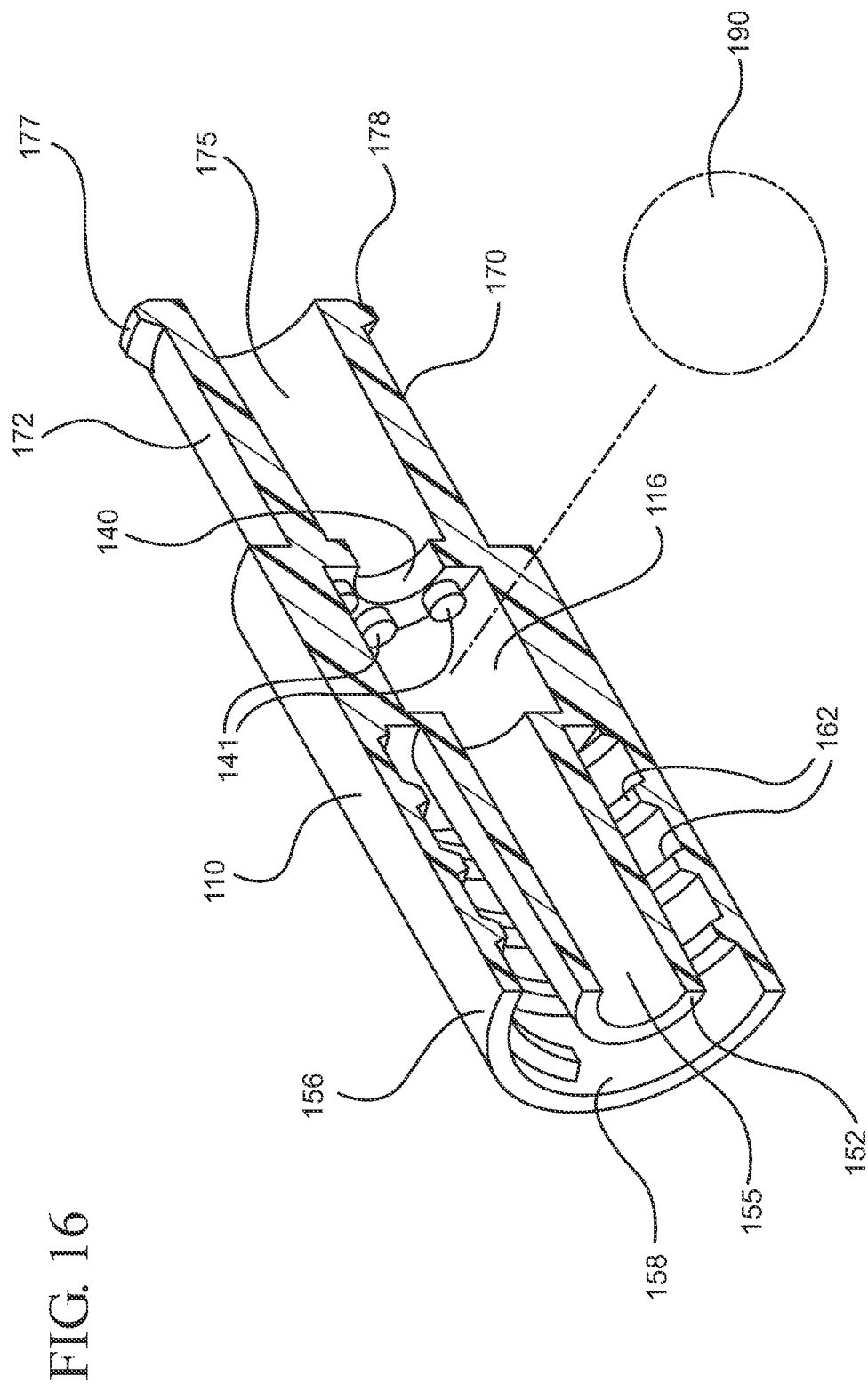


FIG. 17

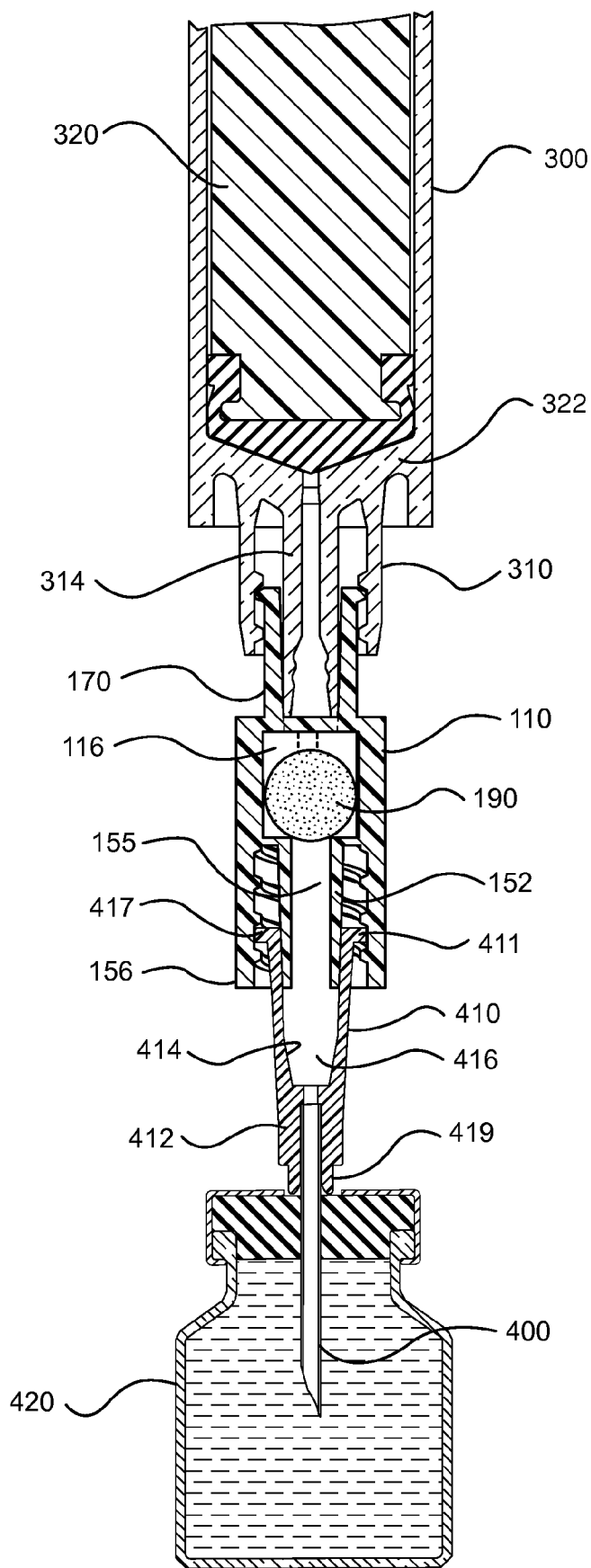


FIG. 18

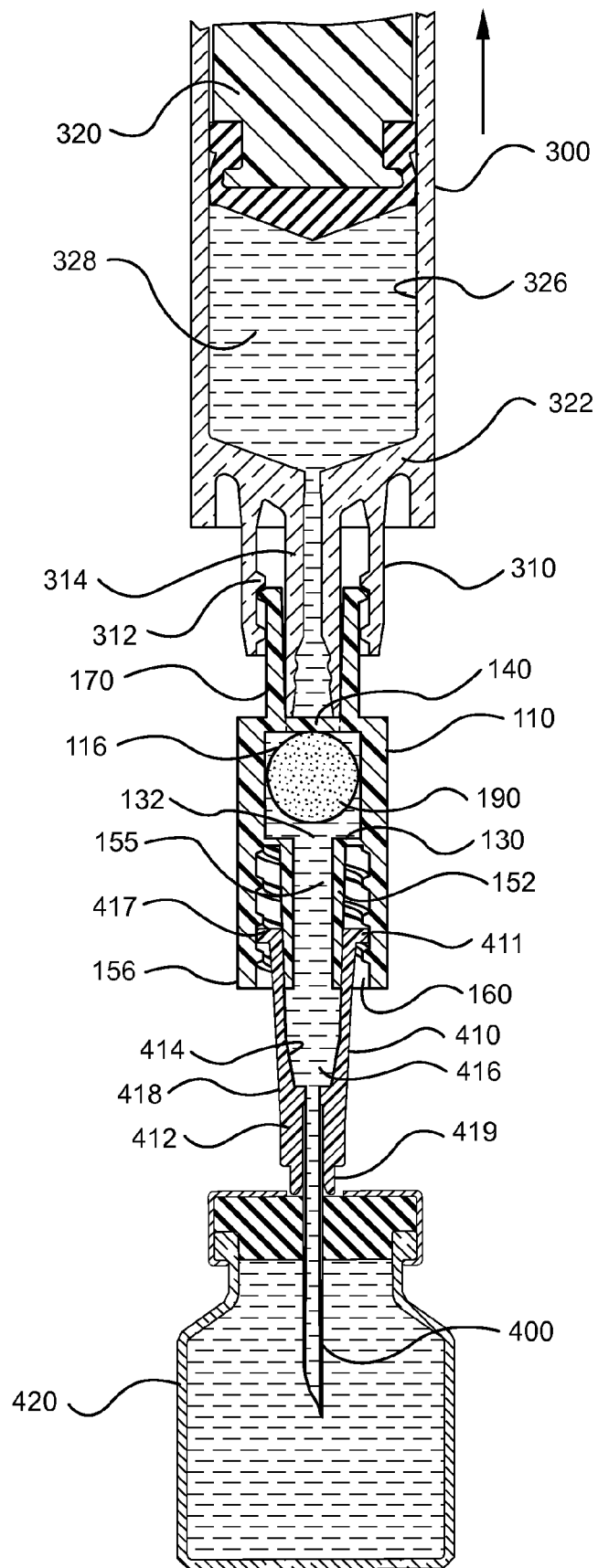


FIG. 19

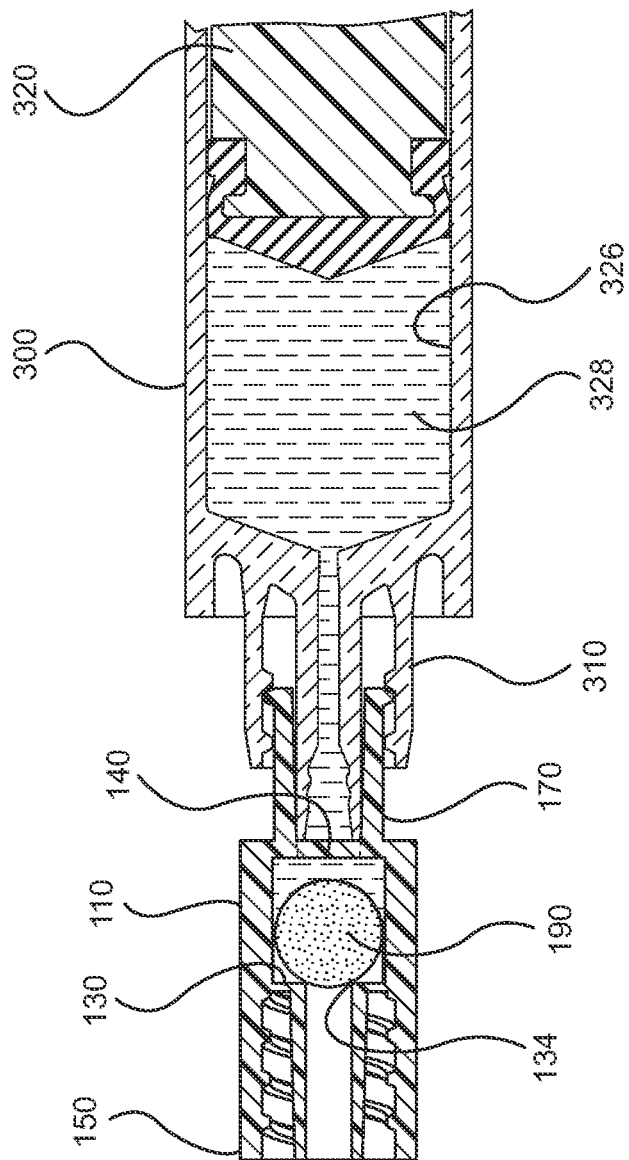


FIG. 20

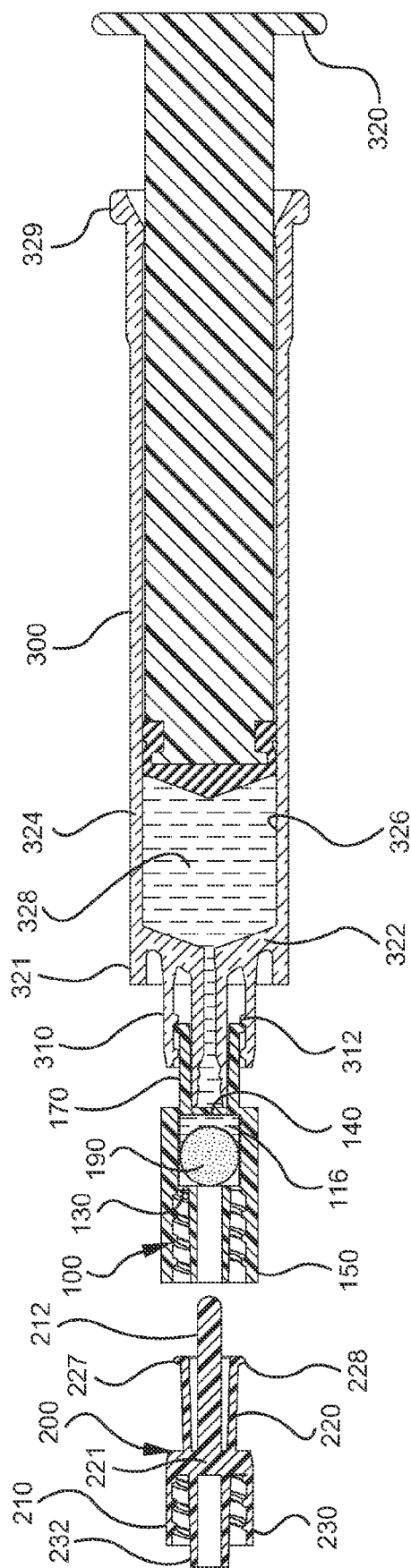


FIG. 22

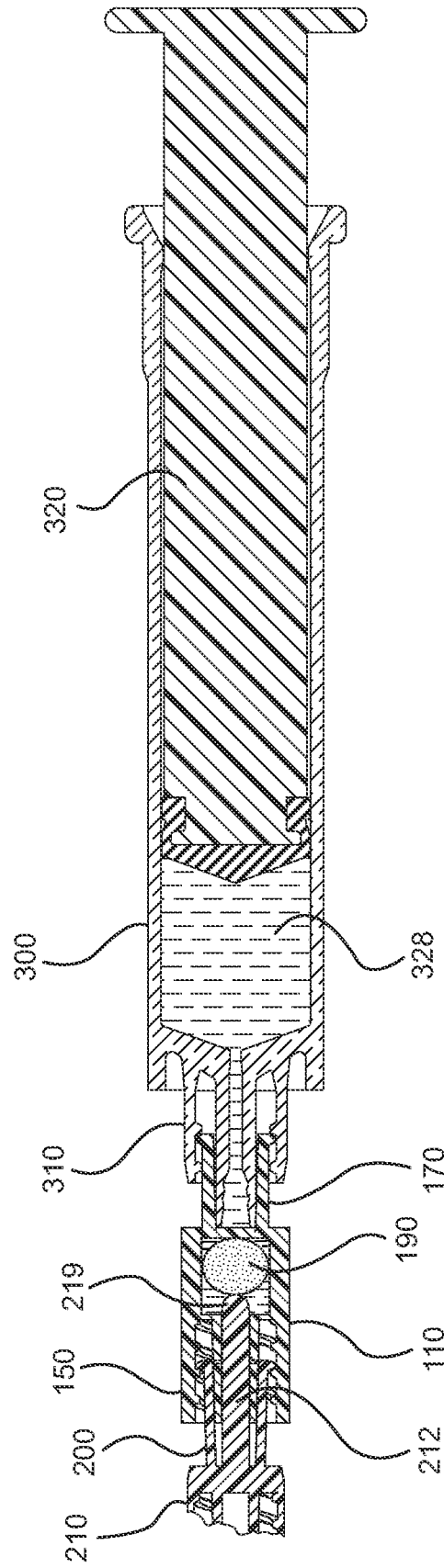
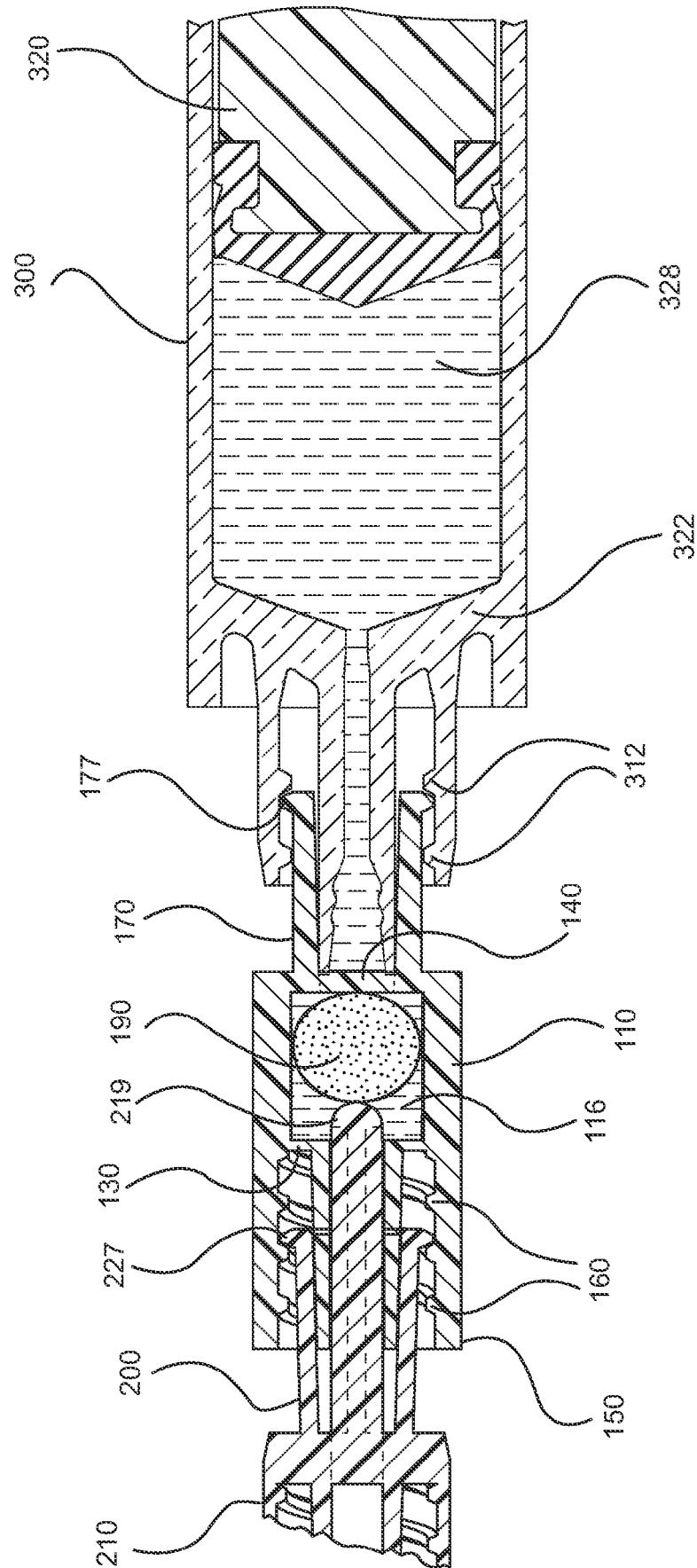


FIG. 23



SAFETY DRUG DELIVERY CONNECTORS**TECHNICAL FIELD**

Aspects of the present invention relate to drug delivery connectors that prevent administration of medication to incorrect delivery ports and methods of using the drug delivery connectors.

BACKGROUND

Drug delivery devices typically share a common ISO standard luer connection, including intravascular, anesthesia and enteral delivery devices. Misconnections of these routes are possible and will cause medication error. The consequences of such errors may be adverse or even fatal.

Previous attempts at reducing errors in drug delivery include the use of labels or color coded devices to differentiate specific route-accessing devices (e.g., catheter connectors) and drug-containing devices or containers for retaining medication (e.g., syringe barrels). Studies have shown that clinicians tend to ignore these labels and color codes. Other attempts to reduce error have required the use of valves with containers to prevent accidental connection and delivery. The operation of such valves often requires additional components to open the valve and/or secure attachment of the valve to the container that can be cumbersome for attachment and use. The use of some of these additional components to open the valve and/or secure attachment of the valve to the container, such as syringe barrels, has also required the use of specialized syringe and/or catheter connections. In specific instances, the valves may have complex structures that are difficult to manufacture and utilize and/or may utilize large surface areas on which meniscus may form between the valve and the wall of the surrounding container within which the drug is stored. Further, the large surface area of the valves provides an increased opportunity for microbial growth, which may cause infection. In addition, typical valves are opened in the direction of the fluid flow and/or are opened by the containers that retain medication to be dispensed. For example, conventional valves may be opened by attaching a push rod to a syringe barrel filled with medication. The push rod activates the check valve in the direction of the fluid flow (from the syringe barrel or other fluid or liquid container). In these configurations the syringe barrel cannot be attached to a standard hypodermic needle, which makes it impossible to pre-attach the push rod connector to the syringe. Further, such valves are generally intended to prevent fluid flow back and could contaminate the medication source.

All of these issues could lead to the malfunction of the valve and drug delivery procedure. In addition, the known devices do not allow the user to remove air from the container. Accordingly, there is a need for a drug delivery connector that can effectively eliminate all wrong-route medication error possibilities for use in a variety of drug delivery procedures with standard syringes and other drug-containing devices. Further, there is a need for a drug delivery connector that permits normal aspiration of medication into a container and air priming, while providing a valve that prevents leakage of the aspirated medication.

SUMMARY

In this disclosure, a convention is followed wherein the distal end of the device is the end closest to a patient and the proximal end of the device is the end away from the patient and closest to a practitioner.

A first aspect of the present invention pertains to a drug delivery connector including a ball valve. In one or more embodiments, the drug delivery connector comprises a housing including an open distal end, an open proximal end and defining a chamber in fluid communication with the open distal end and the open proximal end. The housing may also include a proximal connection portion for attaching the housing to a container and a distal connection portion. The distal connection portion and/or the proximal connection portion may include a luer lock fitting or a luer slip fitting. The ball valve is disposed within the chamber and forms a releasable seal with the open distal end of the drug delivery connector to prevent fluid flow from the open proximal end of the housing to the open distal end of the housing.

The housing also includes a structure for forming one or more fluid flow paths around the ball valve. The structure may be a longitudinal protrusion, a rib, an expanding sidewall and/or combinations thereof. The chamber of the housing may also include a retaining ring that inhibits movement of the ball valve within the chamber in the proximal direction.

The housing of one or more embodiments may also include a proximal wall disposed adjacent to the open proximal end of the drug delivery connector. The proximal wall includes at least one aperture allowing constant fluid communication between the open proximal end and the chamber of the housing. The housing may also include a distal wall disposed adjacent to the open distal end of the drug delivery connector that includes a bore having a perimeter that is configured to contact the ball valve to form a releasable seal between the ball valve and the distal wall.

In one or more embodiments, the ball valve is moveable in a proximal direction to release the releasable seal formed with the distal wall and to permit fluid flow from the open proximal end to the open distal end upon application of a force in the proximal direction on the ball valve. In a specific embodiment, the ball valve is moveable in a distal direction to form the releasable seal with the distal wall upon application of a force in the distal direction on the ball valve. In accordance with one or more embodiments, the attachment of a container including a fluid to the proximal connection portion of the housing causes the fluid held within the container to apply the force to the ball valve in the distal direction to move the ball valve in the distal direction. The force applied to the ball valve causes the ball valve to form a releasable seal with the open distal end.

In one or more embodiments, the drug delivery connector may include an actuator attachable or for attachment to the open distal end of the housing. The actuator includes an open distal end and a projection extending in the proximal direction from the open distal end. In one or more embodiments, the projection includes at least one open path or aperture in fluid communication with the open distal end of the actuator and the open distal end of the housing. Upon attachment of the actuator to the open distal end of the housing, the projection extends through the bore of the distal wall into the chamber and applies a force on the ball valve in the proximal direction to move the ball valve in the proximal direction. In one or more embodiments, the ball valve is movable in the proximal direction upon application of a minimum or pre-determined force on the ball valve in the proximal direction. In one or more embodiments, a coil spring or other device may be disposed within the housing to exert a constant force on the ball valve in the distal direction. The spring constant of the coil spring may be adjusted or selected to select the minimum or pre-determined force required to release the seal between the ball valve and the distal wall.

3

In accordance with a second aspect of the present invention, the drug delivery connector includes a housing including an open distal end, an open proximal end and a chamber in fluid communication with the open distal end and the open proximal end, means for attaching the housing to a catheter connector comprising an actuator, means for attaching the housing to a container and means for permitting and blocking fluid communication between the container and the catheter connector from the open proximal end to the open distal end. In one or more embodiments, the means for permitting and blocking fluid communication comprises a ball valve. In a specific embodiment, the means for permitting and blocking fluid communication comprises a spring-loaded ball valve.

A third aspect of the present invention pertains to a method of delivering liquid medication to a catheter connector. In one or more embodiments, the method includes attaching an actuator, as described herein, to a catheter, providing a drug delivery connector a housing with an open distal end, an open proximal end and a chamber with a valve, as described herein, in fluid communication with the open distal end and open proximal end of the housing, attaching a tip of a syringe barrel to the open proximal end of a drug delivery connector, filling the syringe barrel with a pre-determined amount of liquid medication, filling the chamber of the drug delivery connector with the liquid medication to form a seal between the valve and the open distal end and releasing the seal between the valve and the open distal end by attaching the open distal end to the actuator. In one or more embodiments, the actuator includes a projection with a length that extends into the chamber of the housing. The projection may include an aperture or open path in fluid communication with the catheter connector. The step of releasing the seal between the valve and the open distal end may include causing the projection of the actuator to apply a force to the valve in a proximal direction. In one or more embodiments, the step of releasing the seal between the valve and the open distal end permits the liquid medication to flow from the chamber to the aperture or open path of the projection.

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 illustrates a disassembled perspective view of one or more embodiments of the drug delivery connector shown with a syringe barrel and an actuator;

FIG. 2 illustrates a perspective view of the drug delivery connector shown in FIG. 1 assembled with the actuator;

FIG. 3 illustrates an enlarged view of the drug delivery connector and actuator shown in FIG. 1;

FIG. 4 illustrates a perspective cross-sectional view of the drug delivery connector and actuator shown in FIG. 3 taken along line 4-4 from the view point of the distal end of the drug delivery connector and actuator;

FIG. 5 shows a perspective cross-sectional view of the drug delivery connector shown in FIG. 4;

FIG. 6 illustrates side-elevational view of a drug delivery connector shown in FIG. 5;

FIG. 7 shows a perspective cross-sectional view of the drug delivery connector shown in FIG. 4 including a distal wall according to one or more embodiments of the present invention, a ball valve and a coil spring;

FIG. 8 shows a view of the drug delivery connector shown in FIG. 7 including a distal wall and sidewall according to one or more embodiments of the present invention and a ball valve;

4

FIG. 9 shows a view of the drug delivery connector shown in FIG. 7 including a distal wall and sidewall according to one or more embodiments of the present invention and a ball valve;

FIG. 10 shows a view of the drug delivery connector shown in FIG. 7 including a distal wall and sidewall according to one or more embodiments of the present invention and a ball valve;

FIG. 11 shows a view of the drug delivery connector shown in FIG. 7 including a distal wall and sidewall according to one or more embodiments of the present invention and a ball valve;

FIG. 12 shows a view of the drug delivery connector shown in FIG. 7 including a distal wall and sidewall according to one or more embodiments of the present invention and a ball valve;

FIG. 13 illustrates a cross-sectional view of the proximal end of the drug delivery connector shown in FIG. 4 taken along line 13-13 including a proximal wall according to one or more embodiments of the present invention;

FIG. 13A shows a perspective view of the drug delivery connector shown in FIG. 13;

FIG. 14 shows the proximal end of the drug delivery connector shown in FIG. 13 including a proximal wall according to one or more embodiments of the present invention;

FIG. 14A shows a perspective view of the drug delivery connector shown in FIG. 14;

FIG. 15 shows the proximal end of the drug delivery connector shown in FIG. 13 including a proximal wall according to one or more embodiments of the present invention;

FIG. 15A shows a perspective view of the drug delivery connector shown in FIG. 15;

FIG. 16 shows a perspective cross-sectional view of a drug delivery connector according to one or more embodiments;

FIG. 17 illustrates a cross-sectional view of a drug delivery connector attached to a syringe barrel and a needle hub positioned with a vial to draw liquid into the syringe barrel;

FIG. 18 shows the drug delivery connector, syringe barrel and needle hub shown in FIG. 17 as liquid is being aspirated from the vial into the syringe barrel;

FIG. 19 illustrates a cross-sectional view of the drug delivery connector and syringe barrel shown in FIG. 18 filled with liquid;

FIG. 20 shows a cross-sectional view of the drug delivery connector shown in FIG. 5 assembled with a syringe and an unassembled actuator according to one or more embodiments;

FIG. 21 shows an enlarged partial view of the drug delivery connector, syringe and actuator shown in FIG. 20;

FIG. 22 illustrates the drug delivery connector and syringe and actuator of FIG. 20 in an assembled state; and

FIG. 23 illustrates an enlarged partial view of the drug delivery connector, syringe and actuator shown in FIG. 22.

DETAILED DESCRIPTION

Before describing several exemplary embodiments of the invention, it is to be understood that the invention is not limited to the details of construction or process steps set forth in the following description. The invention is capable of other embodiments and of being practiced or being carried out in various ways.

Aspects of the present invention pertain to drug delivery connectors. The drug delivery connectors may be utilized for delivery of medication from a container to delivery site for delivery to a patient intravenously or via epidural space. Exemplary containers include syringe barrels, IV bag or other

5

medical devices used to store, transport and/or delivery anesthesia. In one or more embodiments, the drug delivery connector provides a fluid-tight connection mechanism between a delivery site and a container. In a specific embodiment, the drug delivery connector provides a fluid-tight connection mechanism between a catheter connector or other delivery site and a syringe barrel. The fluid-tight connection mechanism between a delivery site and a drug container may include a filter. Examples of connection mechanisms utilized to connect a delivery site and syringe barrel to the drug delivery connectors described herein include standard luer slip connections or standard luer lock connections. The drug delivery connectors described herein include a structure to prevent flow of medication from the container when attached to an inappropriate delivery site and permit flow of medication from the container when attached to an appropriate delivery site.

In accordance with one or more embodiments, the drug delivery connector includes a ball valve disposed in the flow path of the medication from a container to a delivery site. The ball valve of one or more embodiments forms a one-way valve or a check valve. As used herein, the term "one-way valve" includes any valves which permit fluid flow in one direction. As used herein, the terms "check valve" may be used interchangeably with the term "one-way valve." In a specific embodiment, the ball valve is activated or opened by an actuator, which may be in the form of a push rod and may not be activated or opened by the container or even the delivery site. In a more specific embodiment, the ball valve is activated by the actuator, which may include a catheter connector for connection of the drug delivery connector and container to a catheter or other delivery site. The ball valve prevents fluid flow across the drug delivery connector from the container to the actuator and, thus, the delivery site. The ball valve permits the user to attach the drug delivery connector to at least one of the container and/or actuator without accidental expulsion of medication from the container. Further the drug delivery connector may be used with containers without fear of leakage or accidental administration of the medication contained therein.

A drug delivery connector **100** according to a first aspect is shown in FIGS. 1-6. As shown more clearly in FIGS. 4-6, the drug delivery connector **100** includes an open distal end **101** and an open proximal end **109**. The drug delivery connector includes a housing **110**, a distal connection portion **150** extending from the housing **110** to the open distal end **101** of the drug delivery connector and a proximal connection portion **170** extending from the housing **110** to the open proximal end **109** of the drug delivery connector. The distal connection portion **150** is in fluid communication with the housing **110** and the proximal connection portion **170**.

For illustration in FIGS. 1-6, a container in the form of a syringe barrel **300** is utilized with the drug delivery connector **100**, although the drug delivery connector according to one or more embodiments may also be utilized with other types of containers, for example, an IV bag. In addition, an actuator **200** including a catheter connector **210** is also included for illustration.

As more clearly shown in FIGS. 4-5, the distal connection portion **150** includes a distal end **151** and a proximal end **159** including a distal luer fitting for attaching the actuator **200** to the drug delivery connector. In one or more embodiments, the distal connection portion **150** of one or more embodiments may include a fitting in the form of a luer slip fitting (not shown) for connection to an actuator **200**. In the embodiment shown in FIGS. 1-6, the distal connection portion **150** includes a fitting in the form of a luer lock fitting including an

6

elongate tube **152** in fluid communication with the housing **110** and extending from the housing **110** to the open distal end **101** of the drug delivery connector. The elongate tube **152** includes an outside surface **154** and a coaxial wall **156** surrounding the elongate tube **152** and defining an inside surface **158** that forms a channel **160** between the inside surface **158** of the coaxial wall **156** and the elongate tube **152**. In one or more embodiments, the inside surface **158** of the coaxial wall **156** includes a threaded portion **162** for engaging the actuator **200**. The elongate tube includes an inside surface **153** defining a passageway **155** for receiving the actuator **200** (as shown more clearly in FIG. 4). The actuator **200** is shown in FIGS. 1-4 and 20-22 is an example of one or more suitable actuators for activating the ball valve **190** and includes catheter connector **210** for attachment of the actuator **200** to a filter system, catheter or other delivery site. In use, the actuator **200** is inserted into the passageway **155** of the distal connection portion **150** of the drug delivery connector. As will be described in further detail below, the actuator **200** may also include a corresponding structure that allows the actuator **200** to be threaded with the threaded portion **162** of the distal connection portion **150** of the drug delivery connector **100**. In one or more embodiments, the flow rate of the medication flowing from the container through the drug delivery connector **100** and to the actuator **200** may be modified or controlled by controlling the level of engagement between the actuator **200** and the drug delivery connector **100**. In one or more specific embodiments, the flow rate may be controlled by controlling the amount of rotation applied to the actuator **200** with respect to the drug delivery connector **100** during attachment.

As shown in the embodiment in FIGS. 4-5, the proximal connection portion **170** of the drug delivery connector extends from the housing **110** toward the open proximal end **109** of the drug delivery connector **100**. The proximal connection portion **170** includes a proximal luer fitting in the form of an elongate hollow body **172** having an open distal end **171**, an open proximal end **179** and an inside surface **173** defining an interior **175** for receiving and engaging an opening of a container, for example, an open tip **314** of the syringe barrel **300** shown in FIG. 1. In one or more embodiments, the elongate hollow body **172** includes an outside surface **176** with at least one radially outwardly extending ridge **177** disposed adjacent to the open proximal end **179**. In the embodiment shown, the elongate hollow body **172** includes two ridges **177**, **178** disposed on opposite ends of the proximal end of the elongate hollow body **172**. In one or more embodiments, the at least one radially extending ridge **177** may extend radially along a portion of circumference of the open proximal end **179** or the entire circumference of the open proximal end **179**. The at least one radially outwardly extending ridge **177** permits assembly of the drug delivery connector **100**, and, more specifically, the proximal connection portion **170**, to a container, for example, the syringe barrel **300** shown in FIG. 1, which may having a luer lock attachment **310** including the open tip **314** and a threaded section **312** surrounding the open tip **314**, as shown in FIGS. 1 and 17-18. To assemble the syringe barrel **300** with a luer lock attachment **310** to the proximal connection portion **170** of the drug delivery connector **100**, the open tip **314** is inserted into the open proximal end **179** of the elongate hollow body **172** and the syringe barrel **300** and/or the drug delivery connector **100** is rotated relative to one another. During rotation, the threaded section **312** of the luer lock attachment **310** engages the at least one radially outwardly extending ridge **177**. In the embodiment shown in FIG. 18, the threaded section **312**

engages both radially outwardly extending ridges **177**, **178** of the proximal connection portion **170**.

In one or more embodiments, the proximal connection portion **170** may permit connection of the drug delivery connector **100** to a syringe with a luer slip tip (not shown). In such 5 embodiments, the inside surface **173** of the elongate hollow body **172** of the proximal connection portion **170** may have a cross-sectional width that increases along the length of the elongate hollow body **172** from the open distal end **171** toward the open proximal end **179** forming a tapered portion (not shown) that frictionally engages the luer slip tip (not shown) of a syringe barrel. To assemble a syringe barrel having a luer slip tip (not shown) to the proximal connection portion **170** of the drug delivery connector, the luer slip tip (not shown) of the syringe barrel is inserted into the interior 10 **175** of the elongate hollow body **172**. A force in the distal direction is applied to the syringe barrel relative to the drug delivery connector **100** until the tapered portion (not shown) of the elongate hollow body **172** and the inside surface **173** prevents further movement of the luer slip tip (not shown) in the distal direction relative to the drug delivery connector **100** and the luer slip tip (not shown) is frictional engaged with the inside surface **173** of the proximal connection portion **170**.

The housing **110** includes a sidewall **112** having an axial length and an interior surface **114** defining chamber **116**. In one or more embodiments, the chamber **116** is cylindrically shaped and has a distal end **111** in fluid communication with the open distal end **151** of the distal connection portion **150** and a proximal end **119** in fluid communication with the open proximal end **179** of the proximal connection portion **170**. In one or more embodiments, the distal end **111** includes a distal wall **130** disposed between the chamber **116** and the distal connection portion **150**. The distal wall **130** includes at least one bore **132** therethrough having a perimeter **134** to permit fluid communication between the distal connection portion 15 **150** and the chamber **116**. The proximal end **119** includes a proximal wall **140** disposed between the chamber **116** and the proximal connection portion **170**. The proximal wall **140** includes at least one aperture **142** to allow fluid communication between the proximal connection portion **170** and the chamber **116**. As will be described in more detail below, the proximal wall **140** has a structure to prevent the formation of a seal that closes the aperture **142** or, in other words, structure that maintains fluid communication between a container and the chamber **116** when the container is attached to the drug delivery connector **100**.

In the embodiment shown in FIGS. 1-6, the chamber **116** of the housing **110** includes a ball valve **190**. As will be described below in more detail, the ball valve **190** cooperates with an actuator **200** to permit fluid communication between the syringe barrel **300**, drug delivery connector **100** and a delivery site which may include a catheter (not shown) and/or filter (not shown). The ball valve **190** cooperates with the distal wall **130** to prevent fluid communication between the chamber **116** and the distal connection portion **150** through bore **132**. According to one or more embodiments, the ball valve **190** remains closed and prevents fluid communication between the chamber **116** and the distal connection portion **150** when the drug delivery connector **100** is attached to a syringe barrel **300** that is filled with medication because the pressure from the medication contained within the syringe barrel **300** applies a continuous force on the ball valve **190** in the distal direction to close the ball valve **190** against the distal wall **130**.

In one or more embodiments, the ball valve **190** is sized to fit within the chamber **116** of the housing **110** and has a solid spherical shape and circular cross-section having a dimension

and shape to form a releasable seal with the distal wall **130**, thereby closing the bore **132** and preventing fluid communication between the chamber **116** and the distal connection portion **150**. The ball valve **190** may be formed from a rubber, plastic, metal or ceramic material or combinations thereof. In one or more specific embodiments, the ball valve **190** may be formed from a synthetic rubber and/or a polyurethane material. In a specific embodiment, the ball valve **190** may be formed from a commonly used plastic or other material and coated with synthetic rubber or other polyurethane-containing materials. The ball valve **190** "floats" or is moveable within the chamber in the proximal and distal direction. Forces such as gravity may cause the ball valve **190** to move in either the proximal or distal direction. Other forces such as fluid pressure may cause the ball valve **190** to close the bore **132** or to move in the distal direction to form a seal with the perimeter **134** of the distal wall **130**.

Embodiments of the present invention utilize ball valves **190** with a reduced surface area than other valves known and used in the art. A reduced surface area eliminates the issues regarding movement of the ball valve within the chamber **116** and reduces the possibility of meniscus forming between the ball valve **190** and the chamber **116**, which could further inhibit movement of the ball valve **190**. The reduced surface area of the ball valve **190** also reduces the possibility of microbials forming on the surface of the ball valve **190**, which can be especially problematic when the drug delivery connector **100** is used with implanted medical devices, such as catheters, which may remain implanted for several days at a time. In addition, the spherical shape of ball valve **190** facilitates manipulation of the ball valve **190** and eliminates problems of misalignment of the ball valve **190** within the chamber **116** due to varying forces exerted at different locations of the ball valve **190**.

In accordance with one or more embodiments, the ball valve **190** may be spring-loaded. A drug delivery connector including a coil spring **192** disposed within the chamber **116** of the housing **110** is shown in FIG. 8. The coil spring **192** includes a distal end **193** disposed adjacent to the ball valve **190** and a proximal end **194** disposed adjacent to the proximal wall **140**. In an inactivated state, the coil spring **192** is expanded, and applies a constant force on the ball valve **190** in the distal direction, forcing the ball valve **190** to remain in contact with the distal wall **130** sealing the bore **132**. Other known structures for applying a constant force on the ball valve may also be utilized. To open the ball valve **190**, the user would apply a force on the ball valve **190**, on the opposite side of the coil spring **192**, in the proximal direction. The proximally directed force applied to the ball valve **190** compresses the coil spring **192** and forces the ball valve **190** to move away from the distal wall **130** to permit fluid communication between the chamber **116** of the housing and the bore **132** in the distal wall **130**. In one or more embodiments, the spring constant of the coil spring may be adjusted to require a minimum or pre-determined amount of force to activate or open the ball valve.

To form a seal with the bore **132** of the distal wall **130**, the ball valve **190** is seated adjacent to the bore **132** and in contact with the distal wall **130**. In one or more embodiments, the bore **132** has a cross-sectional width forming a seat that receives the ball valve **190**. In one or more embodiments, for example, as shown in FIG. 6, the distal wall **130** is vertically disposed or is disposed perpendicularly to the sidewall **112** of the chamber **116** to form a distal wall **130** having a flat configuration. The contact between the ball valve **190** and the distal wall **130** with a flat configuration may be described as a line contact.

In a specific embodiment, the distal wall **130** may be contoured adjacent to the perimeter **134** and the bore **132** to further facilitate the formation of a seal between the distal wall **130** and the ball valve **190**. In accordance with one or more embodiments, as shown in FIGS. 7 and 8, the distal wall **130** may include a chamfer **135** forming a beveled seat **136** for the ball valve **190**. The chamfer **135** allows for a greater surface area of contact between the ball valve **190** and the distal wall **130**. In such a configuration, defects or modifications on the surface of the distal wall **130** are not as likely to compromise the seal formed between the ball valve **190** and distal wall **130** as configurations that provide a smaller surface area of contact between the ball valve and the distal wall **130**.

In one or more embodiments, as shown in FIG. 9, the distal wall **130** may extend proximally into the chamber **116** to form a sharp contact point **137** forming a “sharp contact” with the ball valve **190**. Sharp contact between the sharp contact point **137** and the ball valve **190** is formed when the distal wall **130** is positioned at an angle of less than 90 degrees relative to the sidewall **112**. In other words, during sharp contact between the ball valve **190** and the sharp contact point **137** forms a single line of contact with the ball valve **190**. The single line of contact decreases the likelihood of a defect on the distal wall **130** and/or the ball valve **190** will interfere with the formation of a seal. The decreased contact area between the ball valve **190** and the perimeter **134** increases pressure on the ball valve **190** and compresses the ball valve **190**. This compression improves the seal formed between the distal wall **130** and the ball valve **190**. Compression of the ball valve **190** is particularly pronounced when the ball valve **190** is composed of a softer material or material with smaller elasticity, because it permits dispersal of the force exerted on the ball valve **190**, which is not as possible when the ball valve is composed of more rigid materials.

In one or more embodiments, the chamber **116** of the housing **110** may be modified to align the ball valve **190** in the center of the fluid path. For example, in one or more embodiments, the interior surface **114** may include one or more structures or structural features that permit movement of the ball valve **190** in the proximal and distal directions within the chamber **116** but prevent lateral movement of the ball valve **190**. In FIG. 6, the interior surface **114** of the sidewall **112** includes at least one longitudinal protrusion **120** extending radially outwardly into the chamber **116** of the housing **110**. The longitudinal protrusion **120** defines a smaller cross-sectional width than the cross-sectional width defined by the interior surface **114** of the sidewall **112**. The reduced cross-sectional width defined by the longitudinal protrusion **120** prevents or reduces lateral movement of the ball valve **190** toward the sidewall **112**, while providing a flow path for fluid to flow past the ball valve **190** when the seal between the distal wall **130** and the ball valve **190** is released.

In one or more embodiments, the cross-sectional width of the interior surface **114** of the chamber **116** and the cross-sectional width of the ball valve **190** are sized to permit movement of the ball valve **190** distally and proximally within the chamber **116** but prevent lateral movement of the ball valve **190** toward the sidewall **112** of the housing, which may occur when the flow rate of the medication is low and less pressure is being exerted on the ball valve **190** in the distal direction.

In one or more embodiments, a plurality of longitudinal protrusions **121** is provided along the length of the housing **110**, as shown in FIGS. 7-8. The plurality of longitudinal protrusions **121** reduce the cross-sectional width of the chamber **116** within which the ball valve **190** may move in the

proximal and distal direction but provide multiple flow paths for fluid to flow past the ball valve **190** when the seal between the perimeter **134** of the distal wall **130** and the ball valve **190** is released.

The length, dimensions and/or placement of the longitudinal protrusions or other similar structure may be modified according to the needs of a particular application. For example, if the drug delivery connector is used with a medication that is more viscous, larger or more flow paths may be needed to facilitate flow between the container and the delivery site. In another example, in one or more embodiments, as shown in FIG. 10, the interior surface of chamber may include a plurality of ribs **122** extending from the distal wall **130** to a proximal wall **140** to align the ball valve **190** in the center of the fluid path without significantly reducing the flow rate of the medication flowing from a container through the drug delivery connector **100**. As shown in FIG. 10, the plurality of ribs **122** provides additional fluid flow paths for the fluid, once the seal between the distal wall **130** and the ball valve **190** is released. The plurality of ribs **122** is configured to permit rotational and non-rotational movement of the ball valve **190** in the distal and proximal directions within the chamber. In a specific embodiment, the interior surface **114** of the chamber **116** includes two or more ribs (not shown) permit fluid communication between the distal connection portion **150** and the chamber **116** when the seal between the ball valve **190** and distal wall **130** is released.

In a specific embodiment, as shown in FIG. 11, the cross-sectional width of the interior surface **114** of the sidewall **112** may increase from the distal connection portion **150** to the proximal connection portion **170**. In one or more embodiments, the cross-sectional width of the interior surface **114** of the sidewall **112** may increase linearly. In the embodiment shown in FIG. 10, the housing **110** includes an expanding sidewall **123** including an inside surface **124** defining a cross-sectional width that increases substantially linearly or constantly from the distal end **111** to the proximal end **119** of the housing. In the embodiment shown in FIG. 11, the cross-sectional width of the sidewall **112** increases “stepwise” along the axial length of the sidewall **112**. In such embodiments, the sidewall **112** has a first portion **125** extending from the distal wall **130** along the axial length of the sidewall **112** for a first length and a second portion **126** extending from the first portion **125** to the proximal wall **140**. The cross-sectional width of the first portion **125** may be smaller than the cross-sectional width of the second portion **126**. In one or more embodiments, the cross-sectional width of the first portion **125** may increase from the distal wall **130** to the second portion **126** or remain constant. In one or more embodiments, the cross-sectional width of the second portion **126** may increase from the first portion **125** to the proximal wall **140** or may remain constant. In another embodiment, the cross-sectional width of the first portion **125** and the second portion **126** increases at the same or different rates. As shown in FIG. 11, a transition portion **118** may be included between the first portion **125** and the second portion **126**. In the embodiment shown, the cross-sectional width of the first portion **125** is smaller than the second portion **126** but is constant from the distal wall **130** to the transition portion **118**. The second portion **126** is shown as having a cross-sectional width larger than the first portion **125** but is constant from the transition portion **118** to the proximal wall **140** with the transition portion **118** having a cross-sectional width that increases from the first portion **125** to the second portion **126**.

In one or more embodiments, the sidewall **112** of the chamber **116** may include one or more structural features to align the ball valve in the center of the fluid path. These structural

11

features may also exert a distally directed force on the ball valve 190 to prevent the ball valve 190 from moving in the proximal direction, when the force exerted on the ball valve varies, for example, during air priming or the removal of air from within the syringe or container and before delivery of the medication to the intended delivery site. In one or more embodiments, these structural features prevent movement of the ball valve 190 in the proximal direction and require the exertion of a greater force on the ball valve 190 to move the ball valve 190 in the proximal direction. In one or more embodiments, a structural feature that prevents movement of the ball valve 190 in the proximal direction is shown in FIG. 12. In FIG. 12, the sidewall 112 of the housing 110 the sidewall defines a radial length or circumference and includes a retaining ring 127 extending radially inwardly into the chamber 116. The retaining ring 127 may be formed along discrete portions of the radial length of the sidewall 112 or, alternatively, along the entire radial length of the sidewall 112. In one or more embodiments, the retaining ring 127 includes a perpendicular wall 128 extending radially inwardly into the chamber 116 from the sidewall 112 that defines a cross-sectional width along the retaining ring 127 that is smaller than the cross-sectional width of the sidewall 112. In one or more embodiments, the perpendicular wall 128 includes a beveled inside edge 129. In such embodiments, the beveled inside edge 129 may define a cross-sectional width at increases in the proximal direction along the axial length of the perpendicular wall 128. In an alternative embodiment, the beveled inside edge 129 may define a cross-sectional width that decreases in the proximal direction. In one or more embodiments, the beveled inside edge 129 retains the ball valve 190 in the closed position in contact with the perimeter 134 of the distal wall 130 by forming a physical barrier to movement of the ball valve 190 in the proximal direction. In one or more embodiments, the perpendicular wall may include a flat inside edge (not shown) that defines a constant cross-sectional width along the axial length of the perpendicular wall 128.

In an even more specific embodiment, the interior surface 114 of the chamber 116 and/or the retaining ring 127 may include one or more raised portions (not shown) extending radially that also form a physical barrier to movement of the ball valve 190 in the proximal direction but also provide an open flow path for medication to flow from a syringe barrel through the drug delivery connector 100 when the drug delivery connector 100 is attached to an actuator and the seal between the ball valve 190 and the perimeter 134 of the distal wall 130 is released. In one or more embodiments, the height of the raised portions (not shown) may be adjusted to exert more or less pressure on the ball valve in the distal direction. For example, the height and/or shapes of the raised portions may be increased to exert a greater force on the ball valve in the distal direction and/or to form a physical barrier that is more difficult to overcome than raised portions having a decreased height. In one or more embodiments, the raised portions may also be beveled to exert an even greater force on the ball valve in the distal direction to prevent proximal movement thereof. The chamber of one or more embodiments may include a combination of the longitudinal protrusion 120, the plurality of longitudinal protrusions 121, expanding sidewall 123, the retaining ring 127 and/or the plurality of raised portions (not shown).

The aperture 142 of the proximal wall 140 of the housing 110 provides fluid communication between with the chamber 116 and the open proximal end 179 of the proximal connection portion 170. In one or more embodiments, the proximal wall 140 may include more than one aperture 142. As shown

12

in FIGS. 13-15, the proximal wall 140 may also include a structure to prevent the formation of a seal between the ball valve 190 and the aperture 142. In other words, the proximal wall 140 includes a structure that maintains fluid communication between the chamber 116 and the proximal connection portion 170. In one or more embodiments, the proximal wall 140 may include an irregular contour or geometry that prevents the formation of a seal between the ball valve 190 having a regular spherical geometry.

In one or more embodiments, the proximal wall 140 may include a series of telescoping conduits extending in a fixed position with respect to each other and extend from the chamber 116 to the proximal connection portion 170. FIGS. 13-15 illustrate embodiments which utilizes telescoping conduits that surround the aperture 142 and defining a conduit space. In such embodiments, a first conduit 143 extends in the proximal direction from the side wall 112 of the housing 110 and defines a first cross-sectional width, a second conduit 144 defining a second cross-sectional width extends from the first conduit 143 in the proximal direction to a third conduit 145 defining a third cross-sectional width extends from the second conduit 144 in the proximal direction. In one or more embodiments, the telescoping conduits have varying axial lengths extending in the proximal direction. The cross-sectional widths defined by the telescoping conduits may further decrease from the first conduit 143 to the third conduit 145 further have a decreasing cross-sectional width. For example, the first cross-sectional width of the first conduit 143 may be larger than the second cross-sectional width of the second conduit 144. In one or more embodiments, the second cross-sectional width of the second conduit 144 may be larger than the third cross-sectional width of the third conduit 145.

In one or more embodiments, the first conduit 143 may include first inside surface 146 defining a first conduit space in fluid communication with the aperture 142. The first inside surface includes one or more guide bars 148 extending partially into the first conduit space. In one or more embodiments, the one or more guide bars 148 extend along the axial length of the first conduit 143 and are disposed at equal distances along the first inside surface 146. In one or more embodiments, the second conduit 144 may include a second inside surface 147 defining a second conduit space and includes at least one transverse beam 149 extending across the aperture 142, intersecting the aperture 142 into two openings along the axial length of the second conduit 144. In the embodiment shown in FIGS. 14 and 14A, the second conduit 144 includes two transverse beams 149 extending from equally spaced points along the second inside surface 147 of the second conduit 144 and intersecting at a midpoint in the aperture 142, intersecting the aperture 142 into four equally sized openings along the axial length of the second conduit 144. In the embodiment shown in FIGS. 15 and 15A, the second conduit 144 includes three transverse beams 149 extending from equally spaced points along the second inside surface 147 toward a mid-point in the aperture 142. The three transverse beams 149 shown in FIGS. 15 and 15A intersect the aperture 142 into three equally sized openings along the axial length of the second conduit 144. In one or more embodiments, the transverse beam or beams 149 have an axial length that extends along the axial length of the second conduit 144 and occupies the second conduit space. In a more specific embodiment, the transverse beam or beams 149 may have an axial length that extends beyond the axial length of the second conduit 144 and extends into the first conduit space of the first conduit 143. FIGS. 13A, 14A and 15A illustrate one or more transverse beams 149 that extend into the first conduit space. In one or more embodiments, the third

13

conduit **145** is free of any additional structures and surrounds the aperture **142** adjacent to the proximal connection portion **170**.

The arrangement of the guide bars **148**, the first conduit **143**, second conduit **144**, third conduit **145** and/or transverse beam **149** prevent formation of a seal between the ball valve **190** and the proximal wall **140** because they do not provide a circular edge with which the ball valve **190** may form a line contact interaction. Instead, the guide bars **148**, the first conduit **143**, second conduit **144**, third conduit **145** and/or transverse beam **149**, alone or in combination, form an irregular edge or irregular contact points with the ball valve **190** that prevent the formation of a seal between the ball valve **190** and the proximal wall **140**.

In one more alternative embodiments, the proximal wall **140** may include a plurality of telescoping walls (not shown) extending proximally in a fixed configuration and surrounding the aperture **142** for preventing the formation of a seal between the ball valve and the proximal wall. The plurality of telescoping walls including a first annular wall (not shown) disposed adjacent to the sidewall of the housing, a second annular wall (not shown) between the first annular wall and a third annular wall (not shown). In one or more embodiments, the third annular wall (not shown) is disposed between the second annular wall (not shown) and the aperture **142**. The first annular wall (not shown), second annular wall (not shown) and/or third annular wall (not shown) may have a thickness that elongates the chamber **116** and extends the chamber **116** at least partially into the interior **175** of the proximal connection portion **170**. The first annular wall (not shown) may have a first thickness and the second annular wall may have a second thickness, wherein the first and second thicknesses may be the same or different. The third annular wall (not shown) may be integrally formed with the proximal connection portion **170** and may define the aperture **142**.

In one or more embodiments, the first annular wall (not shown) may include a plurality of detents (not shown) that extend inwardly onto the second annular wall (not shown). The plurality of detents (not shown) are shaped and disposed to prevent formation of a seal between the ball valve **190** and the proximal wall **140**. In one or more embodiments, the plurality of detents (not shown) may be disposed on the second annular wall (not shown) and extend inwardly onto the third annular wall (not shown). The plurality of detents (not shown) may be disposed equidistant from the aperture **142** and each other along the perimeter of the one or more of the first annular wall (not shown), second annular wall (not shown), and/or third annular wall (not shown). In one or more specific embodiments, four detents may be utilized and may be disposed along the first annular wall (not shown) so that they extend inwardly and onto the second annular wall (not shown).

In one or more embodiments, one or more of the first annular wall (not shown), second annular wall (not shown) and/or third annular wall (not shown) may include at least one transverse beam extending across the aperture from opposite ends of the wall. In a specific embodiment, the second annular wall may include a single transverse beam attached at opposite sides of the second annular wall (not shown) and extending across the aperture **142**. The second annular wall may also include two transverse beams (not shown) that intersect at the mid-point of the aperture **142** and divide the at least one aperture **142** into four apertures. In a more specific embodiment, the second annular wall may include three transverse beams (not shown) extending into the aperture **142** and intersecting at a mid-point of the aperture **142**. In such embodiments, the three transverse beams (not shown) divide the at

14

least one aperture **142** into three apertures. The transverse beam (not shown) may be raised from the annular wall on which it is formed and/or connected so it extends proximally into the chamber. In other words, the transverse beam (not shown) may extend proximally from the first annular wall (not shown), second annular wall (not shown) and/or third annular wall (not shown) into the chamber **116** to create provide an unlevel surface or seat for the ball valve **190** adjacent to the first, second and/or third annular walls.

The arrangement of the detents (not shown), the first annular wall (not shown), second annular wall (not shown), third annular wall (not shown) and/or transverse beam (not shown), described herein, prevent formation of a seal between the ball valve **190** and the proximal wall **140** because they do not provide a circular edge with which the ball valve **190** may form a line contact interaction. Instead, the detents (not shown), the first annular wall (not shown), second annular wall (not shown), third annular wall (not shown) and transverse beam (not shown) form an irregular edge or irregular contact points with the ball valve **190**, which together and individually, prevent the formation of a seal between the ball valve **190** and the proximal wall **140**.

In alternative embodiments, the proximal wall **140** may utilize other means to prevent formation of a seal between the ball valve **190** and the at least one aperture **142**. For example, the proximal wall **140** may include a plurality of apertures (not shown) dispersed along the proximal wall **140**. In this embodiment, the at least one aperture **142** disposed along the proximal wall **140** remain open regardless of the position of the ball valve **190**. In one or more embodiments, as shown in FIG. **16**, the proximal wall **140** may include one or more protuberances **141** extending distally into the chamber **116** that prevent the ball valve **190** from being forming a seal with the proximal wall **140**.

An actuator **200** may be provided with the drug delivery connector **100** either separately or pre-attached to a catheter connector **210**. A syringe barrel **300** and/or a hypodermic needle **400**, which may include a metal or plastic cannula that may be blunt, may also be provided separately or attached to the drug delivery connector **100**. The hypodermic needle **400** may be provided with a needle hub **410**, as shown in FIG. **17**. In one or more embodiments, the drug delivery connector **100**, syringe barrel **300** and hypodermic needle **400** are provided in a kit. In a specific embodiment, the drug delivery connector **100**, syringe barrel **300**, hypodermic needle **400** and actuator **200** may be provided in a kit. In a more specific embodiment, the drug delivery connector **100**, syringe barrel **300**, hypodermic needle **400**, actuator **200** and catheter connector **210** may be provided in a kit. In one or more embodiments, the catheter connector **210** may optionally include a filter. Alternatively, the drug delivery connector **100**, syringe barrel **300**, actuator **200**, catheter connector **210**, hypodermic needle **400** and/or filter may be provided separately.

In one or more alternative embodiments, the drug delivery connector is connected to a syringe barrel. The drug delivery connector can be pre-attached to the syringe by the device manufacturer. The syringe barrel may be pre-filled or may be filled by the user using a standard plunger rod and/or a hypodermic needle, or other means. A typical syringe barrel that may be utilized with one or more drug delivery connectors **100** is shown in FIG. **1** and includes a distal end **321** and an open proximal end **329** and an end wall **322**. A sidewall **324** may extend from the distal end **321** to the open proximal end **329** and may include an interior surface **326** that defines a chamber **328** for holding liquids. The distal end **321** of the syringe barrel **300** may also include an open tip in fluid communication with the chamber **328**.

15

A needle cannula (not shown) having a lumen (not shown) may be attached to the open tip **314** of the syringe barrel for aspirating or filling the syringe barrel **300** with medication. When attached to the open tip **314**, the lumen (not shown) is in fluid communication with the open tip **314** and the chamber **328** of the syringe barrel. The syringe barrel **300** may include a luer lock attachment **310** or may also include or a luer slip fitting (not shown). The proximal connection portion **170** of embodiments of the drug delivery connectors **100** described herein may include either corresponding fitting for secure engagement of syringe barrels having both types of luer fittings.

In one or more embodiments, permanent connection mechanisms may be built in the drug delivery connector **100**, so that, upon connection of drug delivery connector **100** on to the syringe barrel **300** or other container the connection becomes permanent and the drug delivery connector and syringe barrel **300** or other container are not detachable. Permanent connection mechanisms may also be built in the actuator **200** so that, upon connection of actuator **200** to the catheter connector **210** or other drug delivery site, which may include a filter, the connection becomes permanent and the actuator **200** and the catheter connector **210** are not detachable. The purpose of the permanent connection is to prevent disconnections between the drug delivery connectors and containers or actuator and catheter connectors or other drug delivery sites, leaving only the joint between the drug delivery connector **100** and the actuator **200** being detachable. The permanent connection can be realized by welding, which may include ultrasonic welding, gluing, or through design, for example, by incorporating one or more ratchet connector, special threads and other structures known in the art.

Alternatively, instead of pre-assembling, the drug delivery connector **100**, actuator **200**, syringe barrel **300** and/or catheter connector **210** may be packed in the procedure trays or provided as standalone units. In such embodiments, the permanent connections can be built into one or more of the drug delivery connector **100** and/or actuator **200** by incorporating ratchet connections, threaded connections or other known structures for connection known in the art.

In one or more embodiments the drug delivery connector **100** may be attached to the syringe barrel **300** when it is empty. Upon connection of the drug delivery connector **100** and the syringe barrel **300**, the ball valve **190** forms a seal with the distal wall **130** of the drug delivery connector **100** once medication enters the chamber **116** of the drug delivery connector. In embodiments which incorporate a spring loaded ball valve **190**, the ball valve **190** forms a seal with the distal wall **130** of the drug delivery connector **100** whether or not medication enters the chamber **116** of the drug delivery connector. In one or more embodiments, the presence of air within the syringe barrel **300** does not necessarily close the ball valve **190** and permits the user to expel any air from within the syringe barrel **300**. The formation of the seal between the ball valve **190** and the distal wall **130** prevents the air and/or medication contained within the syringe barrel **300** from exiting through the bore **132** of the distal wall **130**. The drug delivery connector **100** may remain unconnected or attached to an actuator **200**, until the point at which the medication contained within the syringe barrel **300** is ready to be delivered or administered to a patient.

To fill the syringe barrel **300**, a hypodermic needle **400** may be attached to the distal end of the drug delivery connector **100** that is attached to a syringe barrel **300**. As shown in FIG. **17**, the hypodermic needle **400** is attached to the distal connection portion **150** of the drug delivery connector **100** using

16

a needle hub **410**. In one or more embodiments, needle hub **410** may include an open distal end **411**, an open proximal end **419** and a hub body **412** extending from the open distal end **411** to the open proximal end **419**. The hypodermic needle **400** may be attached to the open distal end **411** using methods known in the art, including adhesive and the like. The hub body **412** includes an inside surface **414** defining a hub cavity **416**.

In one or more embodiments, the hub body **412** includes an outside surface **418**. The outside surface **418** may include a projection **417** or ridge disposed adjacent to the open proximal end **419** and extending outwardly from the outside surface **418** for engagement with the distal connection portion **150**. In one or more embodiments, the projection **417** has a shape and/or dimension to engage the treaded portion **162** disposed on the inside surface **158** of the coaxial wall **156** of the distal connection portion **150**.

In one or more embodiments, the outside surface **154** of the elongate tube **152** is tapered or has a cross-sectional width that increases from the sidewall **112** of the housing to the open distal end **101** of the housing. In one or more alternative embodiments, outside surface **154** of the elongate tube **152** is contoured or is shaped to frictionally engage the inside surface **414** of the hub **440**. According to a specific embodiment, the inside surface **414** of the hub body **412** is contoured or shaped to frictionally engage the outside surface **154** of the elongate tube **152** of the distal connection portion **150**.

After attachment of the hypodermic needle **400** to the distal connection portion **150** of the drug delivery connector, the desired amount of medication can be aspirated or filled into the syringe barrel **300**. In the embodiment shown in FIG. **17**, the syringe barrel **300**, drug delivery connector **100** and hypodermic needle **400** are positioned to draw medication from a medication source, shown in FIG. **16** as a vial **420**. A plunger rod **320** is shown inserted into the syringe barrel **300** and a force is applied to the plunger rod in the proximal direction drawing medication into the syringe barrel **300**.

As shown in FIG. **18**, the force of the medication being drawn or aspirated into the syringe barrel **300** applies a force on the ball valve **190** in the proximal direction, releasing the seal between the ball valve **190** and the distal wall **130** of the drug delivery connector **100**. The medication enters the chamber **116** of the drug delivery connector **100** and passes through the proximal connection portion **170** into the syringe barrel. After drawing the desired amount of medication, the hypodermic needle may be removed. Once the hypodermic needle is removed, as shown in FIG. **19**, the ball valve **190** closes and forms a fluid-tight seal with the distal wall **130** of the drug delivery connector **100**. Specifically, the medication within the syringe barrel **300** exerts a force on the ball valve in the distal direction, forcing the ball valve against the distal wall **130**, or more particularly, the perimeter **134** of the distal wall **130**. When a bolus is needed, the syringe barrel-drug deliver connector assembly is connected to an actuator **200**.

In one or more embodiments, when the drug delivery connector **100** and a container, for example the syringe barrel **300**, are attached, the user may remove air from the syringe barrel **300** by inverting the syringe barrel **300** and drug delivery connector **100** or position the assembled syringe barrel **300** and drug delivery connector **100** so the medication within the syringe barrel **300** moves, by gravity, in the proximal direction relative to the drug delivery connector **100** and the air within the syringe barrel **300** moves, by gravity, in the distal direction relative to the medication into the chamber **116** of the drug delivery connector **100**. In this position, the ball valve **190** will float or drop down toward the proximal wall **140** and the seal between the ball valve **190** and the distal

17

wall **130** is released. As the user applies a force to the plunger rod **320** of the syringe in the distal direction, the air trapped within the chamber **116** of the drug delivery connector **100** and/or syringe barrel **300** is allowed to escape through the aperture **142** of the proximal wall **140** and the open distal end **151** of the distal connection portion **150**. Simultaneously, the medication contained within the syringe barrel **300** is forced into the chamber **116** of the drug delivery connector **100** by the force exerted on the medication by the plunger rod **320**. The medication entering the chamber **116** exerts a force or pressure on the ball valve **190** in the distal direction, causing the ball valve **190** to move distally and reform the seal with the distal wall **130** and prevent fluid communication through the bore **132** of distal wall **130**. The sealed bore **132** prevents the user from directly injecting the medication contained within the syringe barrel **300** into any port without the use of an actuator having a specific shape and/or dimensions to open the seal.

To open the ball valve **190** and administer the medication contained within the syringe barrel **300**, the actuator **200** is attached to the open distal end **101** of the drug delivery connector **100**. The actuator **200** includes a catheter connector **210**. As shown in more detail in FIGS. **20-21**, suitable actuators **200** include an open distal end **211**, a proximal end **219**, and a longitudinally extending projection **212** extending in the proximal direction from the distal end **211** to the proximal end **219**. The proximal end **219** of the actuator **200** is unattached to any structure and may be described as "cantilevered" or a projection **212** that is supported on only one end. The proximal end **219** of the actuator **200** may be described as a blunt tip or rounded tip. In one or more embodiments, the proximal end **219** has an outer diameter that is larger than the inner diameter of standard luer slip connections utilized in most IV medication delivery syringes to prevent accidental connection of IV medication-containing syringes with the actuator **200** and to prevent access to the anesthesia catheter.

In one or more embodiments, the projection **212** has a length that permits the proximal end **219** of the actuator **200** to extend into the chamber **116** of the drug delivery connector **100**, upon attachment of the actuator **200** to the distal connection portion **150** of the drug delivery connector **100**. The projection **212** includes one or more apertures or open paths **214** extending along the length of the projection **212** to permit the medication within the syringe barrel **300** and chamber **116** of the drug delivery connector **100** to flow from the drug delivery connector **100** to a delivery site that is attached to the distal end **211** of the actuator **200**. In one or more embodiments, the projection **212** is in the form of two perpendicularly intersecting beams that extend in the proximal direction and define four openings. In one or more embodiments, the intersecting beams may include a solid end at the proximal end **219** of the actuator **200**. In one or more embodiments, the solid end is in the form of a hemi-sphere (not shown). In a specific embodiment, the projection **212** is in the form of a single, proximally extending beam (not shown) that defines two apertures or open paths **214**. In a more specific embodiment, the projection **212** includes a hollow member (not shown) that extends proximally and includes a conduit (not shown) extending from the open distal end **211** to the apertures or open paths **214** at the proximal end **219** of the actuator **200**.

In the embodiment shown in FIGS. **20-21**, the actuator includes a female fitting or a hub **220**. In one or more embodiments, the hub **220** includes an open proximal end **229**, an open distal end **221** and a wall **222** extending from the open proximal end **229** to the open distal end **221** of the hub. The open distal end **211** of the projection **212** is attached to the

18

open distal end of the hub **220** and extends along the length of the hub **220** to the open proximal end **229**. In one or more embodiments, the wall **222** includes having an outside surface **224** that includes a luer lock structure. In a specific embodiment, the luer lock structure includes at least one radially outwardly extending portion that engages the threaded portion **162** disposed on the inside surface **158** of the coaxial wall **156** of the distal connection portion **150** of the drug delivery connector. In the embodiment shown in FIGS. **1-23**, the radially outwardly extending portion includes two radially outwardly extending tabs **227**, **228**. In an even more specific embodiment, the radially outwardly extending portion **226** includes a peripheral lip (not shown). In one or more embodiments, the inside surface **225** of the wall **222** may have a luer slip structure. In a specific embodiment utilizing a luer slip structure (not shown), the inside surface **225** of the wall may define a tapered cross-sectional width that increases from the open distal end **221** to the open proximal end **229** and is shaped or contoured to frictionally engage a standard luer slip male fitting incorporated in alternative embodiments of a distal connection portion **150**.

In the embodiment shown, the wall **222** of the hub **220** is formed in a coaxial relationship to the projection **212** of the actuator and defines a cavity **216**. The hub may be securely engaged to the distal end **211** of the drug delivery connector **100** by inserting the actuator **200** into the passageway **155** of the elongate tube **152** of the distal connection portion **150** of the drug delivery connector. Where the hub **220** utilizes a luer lock structure, the drug delivery connector **100** and/or the hub **220** may be rotated with respect to each other. In embodiments of the hub **220** utilizing a luer slip structure (not shown), the drug delivery connector **100** is inserted into the **216** cavity of the hub **220** until sufficient frictional interference is formed between the drug delivery connector **100** and the inside surface **225** of the hub **220**.

In the embodiment shown in FIGS. **20-21**, the projection **212** has an axial length that permits the proximal end **219** of the actuator **200** to exert a force on the ball valve **190** in the proximal direction and cause the ball valve **190** move in the proximal direction and release the seal between the ball valve **190** and distal wall **130**, as shown in FIGS. **22-23**. In one or more embodiments, the force exerted on the ball valve **190** in the proximal direction is greater than the force exerted on the ball valve **190** in the distal direction by the medication within the syringe barrel **300** and/or chamber **116** of the drug delivery connector **100**. In an alternative embodiment of the drug delivery connector **100** which incorporates structure to prevent proximal movement of the ball valve **190**, the force exerted on the ball valve **190** by the actuator **200** is greater than the force exerted on the ball valve **190** by the structures.

The amount of force exerted on the ball valve **190** may be adjusted to control or meter the flow rate of the medication through the projection **212**. In one or more embodiments, the projection **212** causes movement of the ball valve in the proximal direction prior to full attachment of the hub **220** and the distal connection portion **150**. In a specific embodiment, the projection **212** causes proximal movement of the ball valve **190** when the hub **220** is fully attached to the distal connection portion **150**.

In accordance with one or more embodiments, the length of the projection **212** may be adjusted to control or meter the amount of force exerted on the ball valve **190** to control or meter the flow rate of the medication contained within the syringe barrel **300** and/or chamber **116** of the drug delivery connector **100**. In a specific embodiment, the length of the distal connection portion **150** and/or hub **220** may be adjusted to control or meter the amount of force exerted on the ball

19

valve 190 to control or meter the flow rate of the medication contained within the syringe barrel 300 and/or chamber 116 of the drug delivery connector 100. In such embodiments, the user may control the flow rate by the amount and direction of rotational force used to engaging the hub 220 and/or distal connection portion 150. For example, if the flow rate is to be increased, the user would rotate the hub 220 and/or distal connection portion 150 so the hub 220 moves in the proximal direction relative to the distal connection portion 150 and engages more of the threaded portion 162 or so the hub 220 and/or distal connection portion 150 are more fully or completely engaged. This relative proximal movement or increased level of engagement between the hub 220 and the distal connection portion 150 causes the projection 212 to apply a greater force in the proximal direction to the ball valve 190 and widening the space between the distal wall 130 and the ball valve 190. During this adjustment, the force applied by the projection 212 on the ball valve 190 would increase relative to the fluid pressure exerted on the ball valve 190 in the distal direction from the flow of the medication out of the syringe barrel 300. If the flow rate is to be decreased, the user would rotate the hub 220 and/or distal connection portion 150 to rotate the hub 220 and/or distal connection portion 150 so the hub 220 moves in the distal direction relative to the distal connection portion 150 and engages less of the threaded portion 162 of the distal connection portion 150 so the hub 220 and/or distal connection portion 150 are less fully or completely engaged. This relative distal movement or decreased level of engagement causes the projection 212 to apply a smaller force in the proximal direction to the ball valve 190, thereby narrowing the space between the distal wall 130 and the ball valve 190. During this adjustment, the fluid pressure exerted on the ball valve 190 from the distal direction by the flow of the medication of the syringe barrel 300 would increase relative to the force exerted on the ball valve 190 in the distal direction by the projection 212.

In one or more embodiments, the actuator 200 may include a shield (not shown) extending from the distal end 221 of the hub 220 toward the proximal end 219 of the actuator 200. The shield (not shown) may be used to guide the connection between the actuator 200 and the drug delivery connector 100. In one or more embodiments, the shield (not shown) may serve as a guide to facilitate connection of the drug delivery connector and the actuator. In addition, the shield (not shown) may protect the actuator from lateral pressure, which may cause the actuator to break, and/or prevent contamination of the actuator.

In one or more embodiments, the shield (not shown) may be provided in the form of a peripheral wall surrounding the hub 220. The peripheral wall (not shown) may be formed to permit space between the hub and peripheral wall to accommodate any external structures of the syringe barrel 300 and syringe tip. In one or more embodiments, the peripheral wall (not shown) may have a constant cross-sectional width. In a specific embodiment, the peripheral wall (not shown) may have a tapered cross-sectional width increasing from the distal end 221 of the hub 220 to the proximal end 229 of the hub 220. The peripheral wall (not shown) may have an expanded cross-sectional width proximally adjacent to the tapered cross-sectional width. The length of the peripheral wall (not shown) may extend from the distal end 221 of the hub 220 beyond the proximal end 229 of the hub. In one or more embodiments, the length of the peripheral wall (not shown) terminates at the proximal end 219 of the actuator 200. In an alternative embodiment, the length of the peripheral wall (not shown) terminates at the proximal end 229 of the hub 220. In one or more embodiments, the peripheral wall (not shown)

20

may be composed of a clear material so the user may ensure complete connection between the hub 220 and the drug delivery connector 100. The peripheral wall (not shown) may be composed of an extruded or molded plastic material.

In one or more embodiments, a catheter connector 210 is attached to the actuator 200 extends distally from the distal end 211 of the hub 220 and actuator 200. The one or more apertures or open paths 214 of the projection 212 and the open distal end 221 of the hub 220 are in fluid communication with the catheter connector 210. The catheter connector 210 may include a luer lock fitting 230 or a luer slip fitting (not shown) for attachment of the actuator 200 to devices such as catheters, a needle, for example, a spinal needle, an epidural needle, or a hypodermic needle and/or filters, for example, epidural filters.

In one or more embodiments, luer lock fitting 230 of the catheter connector 210 may include an open distal end 231 an open proximal end in fluid communication with the open distal end 221 of the hub 220 and the distal end 211 of the actuator 200. As shown in FIGS. 20-23, the catheter connector 210 may include a tubular body 232 extending from the open distal end 231 to the open proximal end 239. A luer wall 234 may surround the tubular body 232 and form a groove 236 between the tubular body 232 and the luer wall 234. The luer wall 234 may also include an inside surface 237 including a plurality of threads 238 for engaging a catheter, filter or other delivery site.

As shown in FIGS. 21-22, during assembly of the actuator 200 to the drug delivery connector 100 and syringe barrel 300, the proximal end 219 of the actuator 200 is inserted into the passageway 155 of the elongate tube 152 of the distal connection portion 150 of the drug delivery connector. The projection 212 is extended through the bore 132 of the distal wall 130 and enters into the chamber 116. Continuous application of a force on the actuator 200 in the proximal direction, whether or not the force includes rotational forces from the hub 220 being threaded into the threaded portion 162 of the distal connection portion 150, exerts a proximally directed force on the ball valve 190 to release the seal formed between the ball valve 190 and the perimeter 134 of the distal wall 130 at the bore.

In embodiments which utilize a coil spring 192 with the ball valve 190, the actuator 200 exerts a force on the ball valve 190 in the proximal direction that compresses the coil spring 192 and moves the ball valve 190 in a proximal direction away from the distal wall 130. The actuator 200 applies a greater force in the proximal direction on the ball valve 190 to overcome the force exerted on the ball valve 190 by the coil spring 192. In embodiments which utilize a retaining ring 127 on the interior surface 114 of the chamber 116 of the drug delivery connector, the actuator 200 applies a greater force in the proximal direction on the ball valve 190 to overcome the distally directed force exerted on the ball valve 190 by the retaining ring 127. Once the seal between the ball valve 190 and the distal wall 130 is released, fluid communication between the syringe barrel 300, the chamber 116 of the drug delivery connector and the actuator 200 is established and medication can be administered from the syringe barrel 300 and drug delivery connector 100 to the least one aperture or open path 214 of the projection 212 of the actuator 200 to the delivery port.

When the drug delivery connector 100 is coupled with the syringe barrel 300 and actuator 200, the pressurized medication in the syringe barrel 300 and drug delivery connector 100 passes around the ball valve 190 through the bore 132 and distal connection portion 150 of the drug delivery connector. In embodiments which utilize a plurality of ribs 122, one

21

longitudinal protrusion 120 and/or a plurality of longitudinal protrusions 121 on the interior surface 114 of the chamber 116, flow of the medication is facilitated by the flow paths created by ribs 122, longitudinal protrusion 120 and/or plurality of longitudinal protrusions 121, which permit a larger area around the ball valve 190 through which the medication can flow.

The position of the ball valve 190 utilizes the natural flow rate and pressure of the medication contained within the syringe barrel 300 to seal the bore 132 of the drug delivery connector 100. In other devices known in the art, the flow rate and direction of the medication is utilized, at least partially, to open such valves. In embodiments of the present invention, the actuator 200 overcomes the flow rate and direction of the pressurized medication contained within the syringe barrel 300 to release the seal and deliver the medication to an appropriate delivery site. The embodiments described herein, provide an additional safety mechanism by providing a structure that maintains the seal between the chamber 116 of the drug delivery connector that inaccessible until the syringe and drug delivery connector are correctly connected to the appropriate delivery site via the actuator. In addition, the embodiments described herein forces the user to counteract natural forces and enhance the steps required for connection of the syringe barrel to a delivery site, such as a catheter. Moreover, this configuration reduces the possibility of leakage or accidental expulsion of the medication contained in the syringe barrel, before connection to an appropriate delivery site. In addition, the position of the valve in the drug delivery connector and/or the shape of the actuator prevent misconnection or access to delivery sites, such as anesthesia catheter, using IV medication syringes or other syringes that contain other types of medication.

A second aspect of the present invention pertains to a method of administering epidural anesthesia to a catheter connector or other delivery site. In one or more embodiments, the method includes attaching a tip of an empty syringe barrel to an open proximal end of a drug delivery connector as described herein that includes a ball valve for sealing the open distal end of the drug delivery connector. The method further includes attaching a hypodermic needle having a cannula and an opening to the distal end of the drug delivery connector so the opening is in fluid communication with the syringe barrel. In one or more embodiments, the method includes, aspirating an amount of an epidural anesthesia into the syringe barrel through the hypodermic needle and drug delivery connector. The fluid flow of the epidural anesthesia from the hypodermic needle releases the seal between the ball valve and the open proximal end. In one or more embodiments, after a desired amount of epidural anesthesia is aspirated, the method further includes removing the hypodermic needle and attaching the distal end of the drug delivery connector to a catheter connector or other delivery site and expelling the epidural anesthesia from the syringe barrel into the catheter connector or other delivery site. After removal of the hypodermic needle and prior to connection of the drug delivery connector to the catheter connector or other delivery site, the ball valve fluid flow from the syringe barrel exerts a force on the ball valve in the distal direction to cause the ball valve to form a seal with the distal end of to prevent fluid communication between the open distal end and the syringe barrel prior to connection with the catheter connector or other delivery site. In one or more embodiments, the method includes opening the seal formed between the ball valve and the open proximal end. In one or more embodiments, opening the seal includes applying a force on the ball valve in the distal direction. In one or more embodiments, the force is applied to the ball valve in the distal

22

direction by providing an actuator with a free proximal end extending proximally from the actuator and inserting the actuator into the open distal end of the drug delivery connector and attaching the open distal end of the drug delivery connector to the actuator.

In an alternative embodiment, the method of administering epidural anesthesia includes filling a syringe barrel having a tip with a pre-determined amount of epidural anesthesia and attaching the tip of the syringe barrel to an open proximal end of a drug delivery connector, as described herein, including an open distal end and a ball valve for sealing the open distal end. In a specific embodiment, the method may include removing air from within the syringe barrel and drug delivery connector after attachment of the tip to the open proximal end of the drug delivery connector. According to one or more embodiments, the method includes filling the drug delivery connector with the epidural anesthesia to close the ball valve and seal the open distal end. In one or more embodiments, the method includes attaching an actuator in fluid communication to the open distal end of the drug delivery connector. In a specific embodiment, the method includes opening the seal by applying a force in the proximal direction to the actuator to exert a proximally directed force on the ball valve to open the ball valve.

Reference throughout this specification to “one embodiment,” “certain embodiments,” “one or more embodiments” or “an embodiment” means that a particular feature, structure, material, or characteristic described in connection with the embodiment is included in at least one embodiment of the invention. Thus, the appearances of the phrases such as “in one or more embodiments,” “in certain embodiments,” “in one embodiment” or “in an embodiment” in various places throughout this specification are not necessarily referring to the same embodiment of the invention. Furthermore, the particular features, structures, materials, or characteristics may be combined in any suitable manner in one or more embodiments.

Although the invention herein has been described with reference to particular embodiments, it is to be understood that these embodiments are merely illustrative of the principles and applications of the present invention. It will be apparent to those skilled in the art that various modifications and variations can be made to the method and apparatus of the present invention without departing from the spirit and scope of the invention. Thus, it is intended that the present invention include modifications and variations that are within the scope of the appended claims and their equivalents.

What is claimed is:

1. A drug delivery connector comprising:

- a housing including an open distal end, an open proximal end and a chamber within the housing in fluid communication with the open distal end and the open proximal end, the housing including a distal connection portion and a proximal connection portion for attaching the housing to a container;
- a ball valve enclosed within the chamber so that the ball valve floats between the open distal end and the open proximal end in the chamber, wherein the ball valve is moveable in a distal direction to form a releasable seal with the open distal end to prevent fluid flow from the open proximal end to the open distal end upon application of force in the distal direction on the ball valve applied by fluid upon attachment of a container containing the fluid to the proximal connection portion, the ball valve movable in a proximal direction to release the releasable seal to permit fluid flow from the open proximal end to the open distal end;

23

an actuator for attachment to the open distal end of the housing, the actuator comprising an open distal end and a projection extending in the proximal direction and including at least one aperture in fluid communication with the open distal end of the actuator and the open distal end of the housing; and

a structure that forms one or more fluid flow paths around the ball valve selected from one or more of a longitudinal protrusion, a rib, an expanding sidewall and combinations thereof.

2. The drug delivery connector of claim 1, wherein the housing comprises a proximal wall disposed adjacent to the open proximal end, the proximal wall including at least one aperture allowing constant fluid communication between the open proximal end and the chamber.

3. The drug delivery connector of claim 1, wherein the housing comprises a distal wall disposed adjacent to the open distal end, the distal wall including a bore having a perimeter, the perimeter configured to contact the ball valve to form a releasable seal between the ball valve and the distal wall.

4. The drug delivery connector of claim 1, wherein the distal connection portion comprises a luer lock fitting.

5. The drug delivery connector of claim 1, wherein the proximal connection portion comprises a luer lock fitting.

6. The drug delivery connector of claim 1, wherein upon attachment of the actuator to the open distal end of the housing, the projection applies a force on the ball valve in the proximal direction to move the ball valve in the proximal direction.

7. A drug delivery connector comprising

a housing including an open distal end, an open proximal end and a chamber within the housing in fluid communication with the open distal end and the open proximal end, the housing including a distal connection portion and a proximal connection portion for attaching the housing to a container;

a ball valve enclosed within the chamber so that the ball valve floats between the open distal end and the open proximal end in the chamber, wherein the ball valve is moveable in a distal direction to form a releasable seal with the open distal end to prevent fluid flow from the

24

open proximal end to the open distal end upon application of force in the distal direction on the ball valve applied by fluid upon attachment of a container containing the fluid to the proximal connection portion, the ball valve movable in a proximal direction to release the releasable seal to permit fluid flow from the open proximal end to the open distal end; and

an actuator for attachment to the open distal end of the housing, the actuator comprising an open distal end and a projection extending in the proximal direction and including at least one aperture in fluid communication with the open distal end of the actuator and the open distal end of the housing;

wherein the housing comprises a retaining ring that inhibits movement of the ball valve in the proximal direction.

8. The drug delivery connector of claim 7, wherein the ball valve is movable in the proximal direction upon application of force in the proximal direction on the ball valve by the actuator, the force of the actuator being sufficient to overcome a distally directed force exerted on the ball valve by the retaining ring.

9. The drug delivery connector of claim 7, wherein the housing comprises a proximal wall disposed adjacent to the open proximal end, the proximal wall including at least one aperture allowing constant fluid communication between the open proximal end and the chamber.

10. The drug delivery connector of claim 7, wherein the housing comprises a distal wall disposed adjacent to the open distal end, the distal wall including a bore having a perimeter, the perimeter configured to contact the ball valve to form a releasable seal between the ball valve and the distal wall.

11. The drug delivery connector of claim 7, wherein the distal connection portion comprises a luer lock fitting.

12. The drug delivery connector of claim 7, wherein the proximal connection portion comprises a luer lock fitting.

13. The drug delivery connector of claim 7, wherein upon attachment of the actuator to the open distal end of the housing, the projection applies a force on the ball valve in the proximal direction to move the ball valve in the proximal direction.

* * * * *